

UNITED STATES DISTRICT COURT
NORTHERN DISTRICT OF OHIO
EASTERN DIVISION

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IN RE: NATIONAL PRESCRIPTION MDL No. 2804  
OPIATE LITIGATION

Case No.  
17-md-2804

Judge Dan Aaron  
Polster

This document relates to:

The County of Cuyahoga v. Purdue Pharma, et  
al., Case No. 17-OP-45004

City of Cleveland, Ohio v. Purdue Pharma L.P.,  
et al., Case No. 18-OP-45132

The County of Summit, Ohio, et al. v. Purdue  
Pharma L.P., et al., Case No. 18-OP-45090

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Videotaped Deposition of
CLARENCE I. TUCKER
January 10, 2019
9:01 a.m.

Taken at:
Brennan Manna & Diamond
75 East Market Street
Akron, Ohio

Stephen J. DeBacco, RPR

<p style="text-align: right;">Page 6</p> <p>1 Exhibit 9 1/17/2017 E-Mail from Amanda . 209 Groeger Re: 2016 Budget</p> <p>2 Comment Bulleted, with Attachment, AKRON_000230168</p> <p>3 to 000230169</p> <p>4 Exhibit 10 2017 Budget Plan, City of 214 Akron, Ohio AKRON_000003228</p> <p>5 to 000003558</p> <p>6 Exhibit 11 March 2018 E-Mail Chain Re: .. 228 % of Non-Violent Safety</p> <p>7 Force Calls Related to Opioid Addiction and Mental</p> <p>8 Health, AKRON_000236377 to AKRON_000236379</p> <p>9</p> <p>Exhibit 12 The City of Akron, Ohio 244</p> <p>10 Plaintiff's Second Supplemental Response and</p> <p>11 Objections to Distributor Defendants' Interrogatory</p> <p>12 No. 18 Pursuant to the Court's November 21, 2018</p> <p>13 Order</p> <p>14 Exhibit 13 3/4/2018 E-Mail from David ... 287 O'Neal to Charles Twigg Re: Meth, AKRON_000246625</p> <p>15</p> <p>16</p> <p>17</p> <p>18</p> <p>19</p> <p>20</p> <p>21</p> <p>22</p> <p>23</p> <p>24</p> <p>25</p>	<p style="text-align: right;">Page 8</p> <p>1 object..... 126 object..... 126</p> <p>2 objection..... 127 object..... 128</p> <p>3 object..... 129 object..... 131</p> <p>4 object..... 132 object..... 132</p> <p>5 object..... 134 object..... 136</p> <p>6 object..... 138 object..... 142</p> <p>7 object..... 142 object..... 143</p> <p>8 object..... 144 object..... 144</p> <p>9 object..... 145 object..... 147</p> <p>10 object..... 148 object..... 150</p> <p>11 object..... 151 object..... 151</p> <p>12 object..... 152 object..... 155</p> <p>13 object..... 155 object..... 156</p> <p>14 object..... 162 object..... 163</p> <p>15 object..... 163 object..... 164</p> <p>16 object..... 164 object..... 166</p> <p>17 object..... 166 object..... 169</p> <p>18 object..... 170 object..... 170</p> <p>19 object..... 171 object..... 171</p> <p>20 object..... 172 object..... 173</p> <p>21 object..... 174 object..... 175</p> <p>22 object..... 178 object..... 179</p> <p>23 objection..... 179 object..... 180</p> <p>24 object..... 180 object..... 181</p> <p>25 object..... 182</p>
<p style="text-align: right;">Page 7</p> <p>1 INDEX OF VIDEO OBJECTION</p> <p>2 OBJECT PAGE</p> <p>3 object..... 23 object..... 42</p> <p>4 object..... 44 object..... 46</p> <p>5 object..... 47 object..... 52</p> <p>6 object..... 52 object..... 54</p> <p>7 object..... 55 object..... 56</p> <p>8 object..... 57 object..... 57</p> <p>9 object..... 57 object..... 58</p> <p>10 object..... 58 object..... 59</p> <p>11 object..... 59 object..... 67</p> <p>12 object..... 73 object..... 73</p> <p>13 object..... 75 object..... 75</p> <p>14 object..... 77 object..... 83</p> <p>15 object..... 83 object..... 85</p> <p>16 object..... 85 object..... 87</p> <p>17 objection..... 87 object..... 96</p> <p>18 object..... 98 object..... 98</p> <p>19 object..... 98 object..... 101</p> <p>20 object..... 102 object..... 103</p> <p>21 object..... 104 object..... 113</p> <p>22 object..... 114 object..... 115</p> <p>23 object..... 116 object..... 116</p> <p>24 object..... 116 object..... 117</p> <p>25 object..... 124</p>	<p style="text-align: right;">Page 9</p> <p>1 object..... 182 object..... 183</p> <p>2 object..... 185 object..... 188</p> <p>3 object..... 194 object..... 194</p> <p>4 object..... 195 object..... 196</p> <p>5 object..... 200 object..... 202</p> <p>6 object..... 203 object..... 206</p> <p>7 object..... 214 object..... 219</p> <p>8 object..... 221 object..... 221</p> <p>9 object..... 221 object..... 222</p> <p>10 object..... 222 object..... 223</p> <p>11 object..... 223 object..... 223</p> <p>12 object..... 224 object..... 225</p> <p>13 object..... 226 object..... 226</p> <p>14 object..... 227 object..... 227</p> <p>15 object..... 228 object..... 231</p> <p>16 object..... 231 object..... 232</p> <p>17 object..... 233 object..... 234</p> <p>18 object..... 234 object..... 235</p> <p>19 object..... 235 object..... 235</p> <p>20 object..... 236 object..... 237</p> <p>21 object..... 239 object..... 240</p> <p>22 object..... 240 object..... 241</p> <p>23 object..... 242 object..... 242</p> <p>24 object..... 243 object..... 248</p> <p>25 object..... 248</p>

<p style="text-align: right;">Page 10</p> <p>1 object..... 249 object..... 250 2 object..... 251 object..... 251 3 objection..... 251 object..... 251 4 object..... 252 object..... 252 5 object..... 253 object..... 254 6 object..... 256 object..... 256 7 object..... 257 object..... 257 8 object..... 259 object..... 259 9 object..... 261 object..... 263 10 object..... 264 object..... 264 11 object..... 266 object..... 267 12 object..... 270 move to strike as nonresponsive..... 271 13 object..... 273 object..... 276 14 object..... 276 object..... 277 15 object..... 279 object..... 280 16 object..... 282 object..... 286 17 object..... 286 object..... 291 18 object..... 294 object..... 294 19 object..... 294 object..... 295 20 object..... 296 object..... 296 21 object..... 299 object..... 300 22 object..... 300 object..... 301 23 object..... 303 object..... 303 24 object..... 303 object..... 303 25 object..... 304</p>	<p style="text-align: right;">Page 12</p> <p>1 THE VIDEOGRAPHER: On the record. 2 Today's date is January 10, 2019. The time is 3 9:01 a.m. 4 We're here in Akron, Ohio, to take 5 the videotaped deposition of Clarence Tucker in 6 the case of National Prescription Opiate 7 Litigation, Case No. 17-md-2804, to be heard in 8 the United States District Court, Northern 9 District of Ohio, Eastern Division. 10 Will Counsel please state their 11 appearance for the record. 12 MS. LEYIMU: Good morning. Tope 13 Leyimu with Motley Rice here for the witness, 14 Summit County, and City of Akron. 15 MS. FLOWERS: Good morning. It's 16 Jodi Flowers from Motley Rice on behalf of 17 Summit County, the City of Akron, and the 18 witness. 19 MR. LANNIN: Good morning. Cortlin 20 Lannin of Covington & Burling on behalf of the 21 Defendant McKesson Corporation. 22 MR. CAREY: Good morning. Patrick 23 Carey, also of Covington & Burling, for 24 Defendant McKesson Corporation. 25 MR. CARTER: Ed Carter for Walmart.</p>
<p style="text-align: right;">Page 11</p> <p>1 object..... 304 object..... 305 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25</p>	<p style="text-align: right;">Page 13</p> <p>1 MR. O'CONNOR: Andrew O'Connor, 2 Ropes & Gray, for Mallinckrodt LLC and SpecGx. 3 MS. PANTINA: Jennifer Pantina, 4 Ropes & Gray, Mallinckrodt LLC and SpecGx. 5 MR. LEMON: Daniel Lemon, Baker 6 Hostetler, for the Endo Defendants. 7 CLARENCE I. TUCKER, of lawful age, called 8 for examination as provided by the Federal 9 Rules of Civil Procedure, being by me first 10 duly sworn, as hereinafter certified, deposed 11 and said as follows: 12 EXAMINATION OF CLARENCE I. TUCKER 13 BY MR. LANNIN: 14 Q. Good morning, Chief. How are you? 15 A. I'm good. Good morning. 16 Q. Good morning. Thank you for coming 17 in today. 18 As you just heard, my name is 19 Cortlin Lannin. I represent one of the 20 defendants in this litigation. 21 Before we get started, could you 22 just please state your full name and title for 23 the record? 24 A. It is Clarence Irwin Tucker, and I 25 am the fire chief for the City of Akron.</p>

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1 Q. Chief, have you been deposed
2 before?
3 A. Have I been deposed before? No.
4 Q. In that case, I hope you'll bear
5 with me while we can discuss some quick ground
6 rules about how we'll proceed today, just to
7 make sure we're on the same page.
8 Do you understand that the court
9 reporter has, a few moments ago, sworn you
10 under oath to tell the truth this -- this
11 morning and throughout our day?
12 A. Yes.
13 Q. And that's the same as if you were
14 sitting in a court of law and you had been
15 administered an oath in that setting as well?
16 A. Yes.
17 Q. Is there anything that might
18 prevent you or impede your ability to give
19 complete and accurate testimony today?
20 A. No.
21 Q. You're not on any cold medication
22 or other medication, for example?
23 A. No.
24 Q. As we proceed today, if I ask a
25 question and you're unsure about what I'm --

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1 what I'm asking, I'd encourage you to ask me
2 for clarification.
3 A. Okay.
4 Q. If there's a word I use that you
5 don't understand or could have multiple
6 meanings, please do just ask and I'd be happy
7 to rephrase or clarify the question. Otherwise
8 we'll assume that you understand what I'm --
9 what I'm asking.
10 Does that make sense?
11 A. Yes.
12 Q. As I ask questions, I'd ask you to
13 allow me to finish my question before you begin
14 answering.
15 There may be occasions when your
16 counsel lodges what's called an objection to a
17 question. That simply means that she's putting
18 on the record that she has some type of
19 objection to the way I've asked my question.
20 But in almost every instance, you'll still need
21 to answer the question as I asked it.
22 Does that make sense?
23 A. Yes.
24 Q. If you have questions about any of
25 that, of course, you can ask your counsel or

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1 myself.
2 A. Okay.
3 Q. You can take a break any time you
4 want. My general practice is to -- to take
5 breaks about every hour so that everyone has a
6 chance to -- to recharge, and the court
7 reporter, most importantly, has a moment to
8 rest his hands.
9 A. Okay.
10 Q. Does that make sense?
11 A. Yes.
12 Q. But if there's a time in between
13 that you need a moment, just let me know and
14 we'll take one.
15 A. Okay.
16 Q. Any questions before we get
17 started?
18 A. No.
19 Q. All right, Chief. Where -- where
20 are you from originally?
21 A. Originally? You mean as in where
22 was I born?
23 Q. We can start there.
24 A. Okay. I was born in West Virginia,
25 came to Ohio when I was about 15. Went to high

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1 school at -- in Garfield Heights, which is a
2 suburb of Cleveland, and then came to the Akron
3 area to go to the University of Akron. Met the
4 woman I would eventually marry and decided to
5 stay here.
6 Q. Excellent. So you've been a native
7 of -- of Ohio since approximately 15? You were
8 age 15?
9 A. Correct.
10 Q. Did you go to high school in
11 Garfield Heights?
12 A. Yes.
13 Q. And you graduated high school?
14 A. Yes.
15 Q. And when did you start at the
16 University of Akron?
17 A. Fall of 1980.
18 Q. Did you start right after you
19 graduated high school?
20 A. Yes.
21 Q. What degree were you pursuing at
22 the University of Akron?
23 A. Engineering.
24 Q. Did you graduate from the
25 University of Akron?

<p style="text-align: right;">Page 18</p> <p>1 A. No. I changed over to Malone 2 University, graduated from there with a degree 3 in business. 4 Q. Where is Malone University? 5 A. It's in North Canton. 6 Q. Nearby? 7 A. Yes. 8 Q. In which year did you switch from 9 University of Akron to Malone University? 10 A. Actually graduated from Malone in 11 2009. 12 Q. So I surmise at some point after 13 you started at the University of Akron, you 14 left that university? 15 A. Correct. 16 Q. And what year was that? 17 A. '83. 1983-ish. 18 Q. So you made it about three years -- 19 A. Yes. 20 Q. -- at the university? 21 May I ask why you left the 22 university before graduating? 23 A. Decided to get married. I had 24 kids. Normal life. 25 Q. After you left the University of</p>	<p style="text-align: right;">Page 20</p> <p>1 attend any other institutes of higher 2 education? 3 A. Well, it depends on what you call a 4 higher -- higher place of learning. I've 5 attended what we call EDI, the Executive 6 Development Institute, through -- it's a 7 firefighter's path of higher education, as well 8 as the National Fire Academy's Executive Fire 9 Officer Program. 10 Q. Was the Executive Development 11 Institute, did that come before the -- the 12 firefighter academy? 13 A. Yes. 14 Q. Do you recall roughly what years 15 you -- you attended that program? 16 A. I think I graduated from that in 17 2006. 18 Q. At a high level, what was the 19 subject matter of -- of the EDI program? 20 A. It prepares you to be the chief of 21 an organization, fire organization. That's a 22 five-year program. 23 Q. Did you attend classes in person, 24 or was this a remote learning? 25 A. In person.</p>
<p style="text-align: right;">Page 19</p> <p>1 Akron in 1983, but before you went back to 2 Malone University, did you attend any other 3 institutes of higher education? 4 A. No. 5 Q. I believe you said you graduated 6 from Malone University in 2009? 7 A. That's correct. 8 Q. Do you recall what year you started 9 back at Malone University? 10 A. 2007. 11 Q. And you graduated with a degree in 12 business? 13 A. Correct. 14 Q. Is that a bachelor's degree? 15 A. It is. 16 Q. Was the program at Malone a 17 full-time program, or were you working at the 18 same time? 19 A. Working at the same time. 20 Q. Understood. So it was a -- like 21 a -- did you go to school at night, or was 22 it a -- 23 A. At night. 24 Q. At night. 25 After Malone in 2009, did you</p>	<p style="text-align: right;">Page 21</p> <p>1 Q. In person. And that was here in -- 2 A. No. That was actually at Dillard 3 University in New Orleans. 4 Q. Did you attend -- were classes only 5 part-time or -- 6 A. Correct. You go for two weeks. 7 Q. Understand. And you didn't move? 8 A. I didn't move. You attended 9 classes for a couple of weeks. They gave you 10 homework assignments, and then you'd go back 11 and come back after 6 months or 12 months, 12 depending on what they needed. 13 Q. Understood. There are worse places 14 to have to spend time, I would suspect. 15 All right. And the second program 16 you mentioned, the National Fire Academy 17 Executive Fire Officer Program -- 18 A. Correct. 19 Q. -- approximately what years did you 20 attend that program? 21 A. 2013 to 2016 or so. 22 Q. And again, the same question. 23 What's the general subject matter of that 24 program? 25 A. It, again, is preparing you to be</p>

<p style="text-align: right;">Page 22</p> <p>1 the -- the executive officer of a fire 2 department. 3 Q. When you complete that program, do 4 you receive some type of certification or -- or 5 degree? 6 A. It is not a true degree, but it is 7 the -- the qualification you need to be the 8 fire chief in any city in the United States. 9 Q. And I -- I neglected to ask. For 10 the EDI program we had been discussing, the 11 same question. Did you receive any type of 12 formal certification or degree off of that -- 13 A. There is a certificate that you 14 receive from both programs, actually, but it is 15 not a formal degree. 16 Q. Okay. So I understand these were 17 the two programs that you attended after you 18 graduated from Malone. Do I have that right? 19 A. That's correct. 20 Q. Were there any other besides those 21 two programs that you attended after Malone? 22 Any other institute or programs like this? 23 A. No, no. 24 Q. In the time between the University 25 of Akron and Malone University, did you attend</p>	<p style="text-align: right;">Page 24</p> <p>1 And paramedic certifications allow 2 you to do a lot of more advanced prehospital 3 care. 4 Q. As I understand it, to -- to be a 5 paramedic, you have to maintain a 6 certification? 7 A. That's correct. 8 Q. And you're no longer certified as a 9 paramedic? 10 A. That's correct. 11 Q. Do you recall approximately when 12 your certification lapsed? 13 A. 1996. 14 Q. When were you first certified as a 15 paramedic? 16 A. 1989. 17 Q. To be an EMT, do you have to 18 continue training and -- and keep up a 19 certification as well? 20 A. Yes. 21 Q. It's just less -- less involved? 22 A. Correct. 23 Q. Is that a fair way to put it? 24 Do you recall when you were first 25 certified as an EMT?</p>
<p style="text-align: right;">Page 23</p> <p>1 any similar programs like those we just 2 discussed? 3 A. No. 4 Q. Besides those programs and what 5 we've discussed already, any other types of 6 certifications or degrees that you hold? 7 A. When you say certifications, my 8 resume is three pages long. 9 Q. Your point is well taken, Chief. 10 My question was not precise enough. 11 A. Okay. 12 Q. Let's strike "certifications." 13 A. Okay. 14 Q. Any other degrees, for example, 15 that you hold? 16 A. No. 17 Q. Chief, do you have any specialized 18 training in medicine? 19 MS. LEYIMU: Object to the form. 20 A. Well, I am currently an EMT. And I 21 have served as a paramedic early in my career. 22 Q. At a high level, could you explain 23 the distinction between those two jobs? 24 A. An EMT is basic training where you 25 can do CPR, first aid, things of that sort.</p>	<p style="text-align: right;">Page 25</p> <p>1 A. 1988. 2 Q. Am I correct that EMTs are now 3 authorized in the -- in the state of Ohio to 4 administer Narcan? 5 A. They are. 6 Q. That's a relatively recent change? 7 A. Well, actually, there were changes 8 that were made back when Narcan was put on many 9 different types of apparatus, so fire trucks, 10 the police cruisers. But, yes, they are 11 authorized to administer Narcan. 12 Q. Am I interpreting that correctly, 13 that around the time that changes were made to 14 the types of apparatus that could carry Narcan 15 was approximately when EMTs were authorized to 16 also administer Narcan? 17 A. I'm sorry. Say it again. 18 Q. Forgive me. I'm just trying to 19 understand your -- your last answer. 20 A. Okay. 21 Q. Is it the case that EMTs were first 22 authorized to begin dispensing Narcan at around 23 the same time that fire trucks and other 24 apparatus started carrying Narcan in Akron? 25 A. That is -- I believe that is</p>

<p style="text-align: right;">Page 26</p> <p>1 correct, so.</p> <p>2 Q. After you left the University of</p> <p>3 Akron in 1983, what was your first job?</p> <p>4 A. Let's see.</p> <p>5 Q. You know what, Chief? Let me --</p> <p>6 let me try this a different way.</p> <p>7 When did you start working at Akron</p> <p>8 Fire Department?</p> <p>9 A. 1988.</p> <p>10 Q. Have you been continuously employed</p> <p>11 at Akron Fire Department since 1988 --</p> <p>12 A. Yes.</p> <p>13 Q. -- 8 -- 1988?</p> <p>14 Between 1983 and 1988, did you hold</p> <p>15 a number of different jobs or just a few ones?</p> <p>16 A. Just a few.</p> <p>17 Q. Okay. So let's talk about those.</p> <p>18 What was the first one?</p> <p>19 A. Therapeutic program worker for the</p> <p>20 State of Ohio, and that was, I believe, 1984 to</p> <p>21 about 1987.</p> <p>22 Q. And at a high level, what -- what</p> <p>23 did that job entail?</p> <p>24 A. It was a job that required you,</p> <p>25 first of all, to be trained in first aid and</p>	<p style="text-align: right;">Page 28</p> <p>1 Q. How did you come to apply for that</p> <p>2 job?</p> <p>3 A. There was a process where you --</p> <p>4 you took a civil service exam, and you waited</p> <p>5 on the results, and if you were high enough,</p> <p>6 they called you for the next portion, which</p> <p>7 included a, you know, physical test, a -- a</p> <p>8 medical examination, an interview, and a</p> <p>9 background search. And if you passed all of</p> <p>10 those, then you were -- you're considered for</p> <p>11 employment.</p> <p>12 Q. Had you previously been interested</p> <p>13 in firefighting or -- or medicine before</p> <p>14 joining AFD?</p> <p>15 A. Had I been interested in it? Yes.</p> <p>16 Q. After you're hired, I assume</p> <p>17 there's a fairly rigorous training regime?</p> <p>18 A. Correct.</p> <p>19 Q. And your job title, just to make</p> <p>20 sure I have this right, it was firefighter</p> <p>21 medic?</p> <p>22 A. Correct.</p> <p>23 Q. That's kind of the starting</p> <p>24 position for people entering the Akron Fire</p> <p>25 Department?</p>
<p style="text-align: right;">Page 27</p> <p>1 CPR, and you were helping kids that were</p> <p>2 mentally unstable, that have gone through quite</p> <p>3 a few traumatic type of -- of instances and</p> <p>4 helping them to cope and -- and get back into a</p> <p>5 normal type of a, well, routine or life.</p> <p>6 Q. That was here in Akron?</p> <p>7 A. No. That was actually in</p> <p>8 Northfield, in Sagamore Hills.</p> <p>9 Q. Is that a suburb?</p> <p>10 A. That is a suburb of Cleveland.</p> <p>11 Q. Very good. Okay. After that</p> <p>12 position or at that job, what was your next</p> <p>13 one?</p> <p>14 A. Actually, the next job was the</p> <p>15 Akron Fire Department.</p> <p>16 Q. Oh, I understand. You had one job</p> <p>17 between graduat- -- or leaving Akron University</p> <p>18 and starting at AFD?</p> <p>19 A. True job, yes.</p> <p>20 Q. All right. When you started at</p> <p>21 Akron Fire Department in 1988, what was your</p> <p>22 first job?</p> <p>23 A. Firefighter medic. It is a -- as a</p> <p>24 new employee of the City of Akron, you learn</p> <p>25 the job of firefighter medic.</p>	<p style="text-align: right;">Page 29</p> <p>1 A. That is correct.</p> <p>2 Q. If I have my years right, it was</p> <p>3 approximately at this point that you earned</p> <p>4 your certification as a paramedic?</p> <p>5 A. As soon as I was done with fire</p> <p>6 school, then, yes, I was enrolled into the</p> <p>7 paramedic program.</p> <p>8 Q. Are all fire medics at Akron Fire</p> <p>9 required to be certified as paramedics?</p> <p>10 A. Initially, yes.</p> <p>11 Q. And over time, as your position</p> <p>12 changes --</p> <p>13 A. Over time, as your position changed</p> <p>14 or many years that you've served in the medic</p> <p>15 program, you are allowed to bid out if you want</p> <p>16 -- choose.</p> <p>17 Q. Initially -- make sure I understand</p> <p>18 this -- however, you are required to -- to be</p> <p>19 certified as a paramedic?</p> <p>20 A. That's correct.</p> <p>21 Q. Do you recall approximately until</p> <p>22 what year you -- you held the title</p> <p>23 "firefighter medic"?</p> <p>24 A. Well, when you say "medic," it also</p> <p>25 includes the EMT portion of it. I'm still</p>

<p style="text-align: right;">Page 30</p> <p>1 considered a firefighter medic even today, but 2 when you -- if you're referring -- are you 3 referring to the paramedic? 4 Q. Let me -- let me try again. 5 A. Yeah. Rephrase that, please. 6 Q. Start with a predicate question. 7 A. Okay. 8 Q. What would you describe, at a high 9 level, the job responsibilities of a -- a 10 firefighter medic, meaning the job that you 11 held when you first started? 12 A. Responsibilities are to, first of 13 all -- first of all you take an oath to serve 14 and help the citizens of Akron and the 15 surrounding community. You -- you learn how 16 to, again, become an EMT and a state-certified 17 firefighter. You learn how to extricate people 18 from, say, MVAs, or motor vehicle accidents, 19 and other assorted things. 20 So, I mean, if you really want to 21 know all of the details of being a firefighter 22 medic, it's going to take us a while, but 23 that's an overview. 24 Q. I understand. My assumption -- and 25 I -- tell me if I'm wrong, Chief -- is that the</p>	<p style="text-align: right;">Page 32</p> <p>1 and when you're done, I'll have some questions 2 for you about it. 3 There's occasionally very 4 voluminous ones that are hundreds of pages, and 5 instead of having you sit here for two days and 6 review the whole thing, I'll -- I'll encourage 7 you to look at only certain sections that we'll 8 talk about. 9 But in general, you should take as 10 much time as you need to review any of these 11 documents. 12 Does that make sense? 13 A. Okay. 14 - - - - - 15 (Thereupon, Deposition Exhibit 1, 16 Document Titled "Safety 17 Department/Division of Fire 18 Organization Chart, June 2017," 19 AKRON_000003559, was marked for 20 purposes of identification.) 21 - - - - - 22 A. Okay. 23 Q. Good? Chief, do you recognize this 24 document? 25 A. I do.</p>
<p style="text-align: right;">Page 31</p> <p>1 firefighter medic is kind of the front line of 2 emergency response in Akron, be it a fire or 3 medical emergency? 4 A. That is correct. 5 Q. The individual who actually goes to 6 the incident? 7 A. Yes. 8 Q. All right. So let me try my -- my 9 question again. 10 Approximately how long did you 11 serve in that capacity as a firefighter medic? 12 A. As a firefighter? 13 Q. Yeah. 14 A. Until I was promoted to lieutenant, 15 with a -- which would have been 2000. 16 Q. All right. I'd like to introduce a 17 document to help us discuss these types of 18 issues. It will be marked as Defendants' 19 Exhibit 1. 20 So, Chief, today, as we -- as we 21 look at documents, the court reporter will mark 22 it and hand it to you. 23 A. Okay. 24 Q. And I'd encourage you to take as 25 much time as you need to review the document,</p>	<p style="text-align: right;">Page 33</p> <p>1 Q. And what is it? 2 A. It's our organizational chart. 3 Q. You see on the heading it's labeled 4 June 2017? 5 A. Yes. 6 Q. To the best of your memory, is this 7 an accurate reflection of the structure of the 8 AFD at this point in time? 9 A. I believe it is. 10 Q. Have there been any material 11 changes to the structure of AFD since that -- 12 since June 2017? 13 A. Well, let's clarify. When you say 14 changes, some personnel have changed, but 15 the -- the different bureaus have remained the 16 same. 17 Q. Excellent. That's exactly -- 18 exactly what I was asking. 19 Chief, the reason I introduced this 20 now is I'm hoping that as we walk through your 21 career at AFD, we can try to pinpoint where on 22 this org chart you would have been working at 23 that point in time. 24 A. Sure. 25 Q. So starting with firefighter medic</p>

<p style="text-align: right;">Page 34</p> <p>1 in 1988, is there a specific bureau or section 2 in this org chart that you would have been 3 located? 4 A. Yes. Operations subdivision. 5 Q. And under that -- under that branch 6 is there a specific subbranch? 7 A. Well, actually I've been on a 8 couple of different shifts. I was on the B 9 shift as well as sometimes on the C shift 10 during that time. And that's from 1988 to 11 about 1996, approximately. 12 Q. Can you briefly explain the 13 three-shift structure that Akron Fire 14 Department uses? 15 A. Sure. Each shift works a 24-hour 16 period, and then they are off for the next 48 17 hours before they work again. And so during 18 that 48 hours, the next shift would take the 19 second 24 hours, and the third would take the 20 third. So you're basically working a 21 24/48-hour shift. 22 Q. Understood. And -- and you just 23 testified that you worked -- 24 A. Uh-huh. 25 Q. -- in the B shift, and then at some</p>	<p style="text-align: right;">Page 36</p> <p>1 A. Different scenarios. 2 Q. -- people evaluating your response? 3 A. Sometimes yes, sometimes no. 4 Q. Understand. 5 After you were promoted to 6 lieutenant, did -- were you assigned to a 7 specific shift at that point? 8 A. Well, in 1996, I moved from what I 9 would call the line, which is on a shift, to 10 what's called the Hazardous Materials Rescue 11 Bureau, which, on this organizational chart, is 12 listed as "Special Operations." 13 Q. All right. So I missed that step. 14 I appreciate your clarifying. 15 So how did your responsibilities 16 change when you moved to that bureau in 1996? 17 A. Well, the difference is versus 18 working the line on an actual fire truck. I 19 moved into an office and I worked five 20 eight-hour days, and my responsibilities were 21 as the hazardous materials inspector. 22 I went out and inspected facilities 23 with hazardous materials and worked with the 24 County's special operations division, and -- so 25 basically it was an office job.</p>
<p style="text-align: right;">Page 35</p> <p>1 point in the C shift? 2 A. Correct. 3 Q. When you're a firefighter medic, to 4 whom do you report, directly report? 5 A. A lieutenant. 6 Q. And you said you were promoted to 7 lieutenant in 2000? 8 A. That's correct. 9 Q. And how did -- how did you apply 10 for that promotion, if you applied? 11 A. I did apply for it. You took a -- 12 a written test, as well as an assessment center 13 test. 14 Q. The assessment test is not -- is 15 not written? 16 A. The assessment center was not 17 written. It was basically like what we're 18 doing today. 19 Q. People asking you questions? 20 A. Well, either people asking you 21 questions or you see something on a screen, 22 depending on the promotion. It could be where 23 you watch a screen and say, okay, now what are 24 you going to do with this situation? 25 Q. And there's people --</p>	<p style="text-align: right;">Page 37</p> <p>1 Q. Was your job title at that point 2 still firefighter medic? 3 A. It is -- I was a firefighter medic, 4 but I was also the inspector. 5 Q. Understood. 6 A. The hazmat inspector. 7 Q. To -- to take on that role in 1996, 8 were you required to take any type of exam or 9 apply for the job? 10 A. I had to apply for the job, but I 11 wasn't required to take an exam. It's a 12 lateral move, not a promotion. 13 Q. Understood. So just to make sure I 14 understand, after -- after you made that switch 15 in 1996, you weren't on the line, as you put 16 it? 17 A. Correct. 18 Q. You weren't responding to 19 emergencies? 20 A. That's correct. 21 Q. So in 2000, when you were promoted 22 to lieutenant, were you still working in this 23 hazardous materials bureau? 24 A. That is correct. 25 Q. And I believe you said that would</p>

<p style="text-align: right;">Page 38</p> <p>1 be under the special operations branch on 2 org -- 3 A. That is correct. 4 Q. -- Defendants' Exhibit 1? Good. 5 At that point, were you in charge 6 of the hazardous materials bureau? 7 A. I was the assistant bureau manager. 8 Q. Okay. What was your next 9 promotion? 10 A. Next promotion was in 2004 to 11 captain. 12 Q. When -- when you received that 13 promotion in 2004, were you still working at 14 the hazardous materials bureau? 15 A. I was, and yet I would fill out on 16 the line to the operations subdivision whenever 17 needed. So you work, again, an office most of 18 the time, but you would have to fill in on 19 occasion out to the line. Whenever needed. 20 Q. What was the process for applying 21 for captain? 22 A. Again, it was a written test as 23 well as an assessment center. 24 Q. What was your next promotion after 25 captain?</p>	<p style="text-align: right;">Page 40</p> <p>1 bureau manager. 2 I was a captain for about a year, 3 and then as a district chief. 4 Q. Excellent. So it sounds like at 5 some points when you were a lieutenant -- I'm 6 sorry -- a captain, you were back on the line? 7 A. Correct. 8 Q. But otherwise moved around -- 9 A. Yes. 10 Q. -- from various bureaus to bureaus? 11 A. Wherever needed. 12 Q. As needed. Understood. 13 Okay. So approximately 2013, you 14 had moved over to the fire inspection bureau? 15 A. That is correct. 16 Q. And -- 17 A. It's called bureau of fire 18 prevention, still under special operations 19 subdivision. 20 Q. You read my mind. 21 So after approximately a year, if I 22 have my timeline right, at the bureau of fire 23 prevention, you were promoted to captain -- or 24 district chief? 25 A. Correct.</p>
<p style="text-align: right;">Page 39</p> <p>1 A. After captain, I was promoted to 2 district chief in 2014, '15. In around that 3 time. 4 Q. Okay. You were captain for 5 approximately ten years? 6 A. Approximately. 7 Q. During the 10-year tenure, 8 approximate 10 years when you were a captain, 9 were you in the hazardous materials bureau the 10 entire time? 11 A. No. 12 Q. And when did you switch bureaus? 13 A. That gets complicated. It was 14 whenever was needed. There was times when I 15 spent a six-month time period out on the line 16 as a battalion captain, and I did that a number 17 of times. 18 There was times when I was the 19 special operations assistant bureau manager, 20 and then later I was the acting bureau manager, 21 then I was the official bureau manager. 22 Later -- and we -- you know, at, I 23 want to say approximately 2013, I was 24 transferred from special operations into the 25 fire inspection bureau, and there I was the</p>	<p style="text-align: right;">Page 41</p> <p>1 Q. The promotion to district chief, 2 did it involve the same type of application 3 process? 4 A. That's complicated. The 5 application process, you had to apply, 6 obviously, but you -- the process of actual 7 promotion was a little different. 8 Q. How so? 9 A. We were in the middle of a lawsuit 10 from -- I don't know if you've heard much about 11 this, but for the about previous 10 years, and 12 so there was both a -- a written test and an 13 assessment center, as well as just actually 14 promoting people to district chief from 15 seniority list. So there was a -- we actually 16 took both tests, did the test, as well as were 17 actually promoted by seniority. So it got 18 complicated. 19 Q. We don't -- we don't need to go 20 down the rabbit hole of the lawsuit. 21 A. Good. Thank you. Thank you. 22 Q. It's not why we're here today. 23 A. Good. 24 Q. But am --- am I correct -- I have a 25 vague recollection that one outcome of the</p>

<p style="text-align: right;">Page 42</p> <p>1 settlement of that lawsuit was that a group of 2 officers were promoted? Is that -- 3 A. That is correct. 4 Q. Is that fair? 5 A. Yes. 6 Q. Were you part of that group? 7 A. I was a -- 8 MS. LEYIMU: Object to the form. 9 A. I was a part of the group that was 10 promoted in 2004. Not -- not the part -- not 11 the group that was promoted later. That was 12 the captain's promotion. 13 Q. Understood. That lawsuit has been 14 resolved? 15 A. It has. 16 Q. All right. So as a district chief 17 in the bureau of fire prevention, how would you 18 describe your job responsibilities? 19 A. In charge of basically three areas: 20 inspection, arson, and community relations. 21 Q. Have the -- have -- have strike it. 22 What do you mean by "community 23 relations"? 24 A. A combination of both going out and 25 speaking to schools. I was in charge of the</p>	<p style="text-align: right;">Page 44</p> <p>1 Q. Does the City of Akron charge for 2 fire inspections? 3 MS. LEYIMU: Object to the form. 4 A. No. 5 Q. Purely for my edification, are -- 6 are fire inspections scheduled, or are they ad 7 hoc to catch people off? 8 A. They're -- well, there are both. 9 There are some that are scheduled and some that 10 are ad hoc. 11 Q. What was your next promotion from 12 district chief? 13 A. From district chief, I was promoted 14 to fire chief in December of 2016. 15 Q. December 1, 2016? 16 A. That's correct. 17 Q. So you were district chief for only 18 a year or so, is that -- 19 A. Correct, yes. 20 Q. At the time that you were promoted 21 to chief, were you still working in the bureau 22 of fire prevention? 23 A. Yes. 24 Q. Has -- I assume, as chief now, 25 you're no longer assigned to that bureau.</p>
<p style="text-align: right;">Page 43</p> <p>1 group that went out and spoke to schools, to 2 kids, to senior citizens at public events, as 3 well as the -- the person that was responsible 4 for PIO. So our -- our person that would speak 5 to the media at a large-scale fire. 6 Q. So, for example, talking to kids 7 about how to prevent fires? 8 A. That is correct. 9 Q. And if there was a large-scale fire 10 in which the media was interested, you might 11 represent the -- the Akron Fire Department 12 on -- on camera? 13 A. Either I would, or I would assign 14 someone to do it. 15 Q. If there was an arson, would it be 16 your responsibility to talk to the media about 17 that? 18 A. There are times when I have, yes. 19 Q. When you were a district chief of 20 that bureau, did you physically do inspections, 21 or was that subordinates? 22 A. Subordinates. 23 Q. And they would report to you about 24 the results? 25 A. Correct.</p>	<p style="text-align: right;">Page 45</p> <p>1 You're -- you have oversight over the whole 2 department? 3 A. That's correct. 4 Q. Okay. The process of applying for 5 chief, can you describe that at a high level? 6 A. Yes. It's a process where you had 7 an interview with the mayor and people of his 8 cabinet. And there was an initial interview, 9 and then the -- the people that were -- then 10 that list -- the list was pared down to the top 11 three, and then there was a second interview. 12 Q. No written or assessment exam -- 13 A. No. 14 Q. -- for this job? 15 A. No. 16 Q. This is purely interview? 17 A. Yeah, that is correct. 18 Q. Is the position of chief an 19 appointed position? 20 A. It is. 21 Q. Is the mayor's -- it's the mayor's 22 appointment? 23 A. That is correct. 24 Q. Is the mayor's choice subject to 25 any type of approval or oversight?</p>

<p style="text-align: right;">Page 46</p> <p>1 A. No.</p> <p>2 Q. Do you know how -- approximately</p> <p>3 how many other candidates were applying for the</p> <p>4 job?</p> <p>5 A. I think, total, there were 10 of</p> <p>6 us.</p> <p>7 Q. Were they all in -- from AFD or</p> <p>8 outside --</p> <p>9 A. Yes, all from AFD. From within.</p> <p>10 Q. Is there any hard feelings within</p> <p>11 the department about your promotion?</p> <p>12 MS. LEYIMU: Object to the form.</p> <p>13 A. You'd have to ask the other people</p> <p>14 that applied with me.</p> <p>15 Q. You don't hold any hard feelings --</p> <p>16 A. Of course not.</p> <p>17 Q. -- with your other candidates?</p> <p>18 A. No.</p> <p>19 Q. You said it was -- was two</p> <p>20 interviews?</p> <p>21 A. That's correct.</p> <p>22 Q. Do you have any expectations about</p> <p>23 how long you'll serve as chief?</p> <p>24 A. I would anticipate at least another</p> <p>25 couple of years.</p>	<p style="text-align: right;">Page 48</p> <p>1 always just cut and dry as you listed.</p> <p>2 Q. Understood. Understood.</p> <p>3 All right. Today, I believe you</p> <p>4 said earlier, this remains an accurate</p> <p>5 reflection of the structure of AFD. The</p> <p>6 personnel may have changed, but the</p> <p>7 structure is --</p> <p>8 A. Pretty much, yes.</p> <p>9 Q. -- is accurate?</p> <p>10 You report to the deputy mayor for</p> <p>11 public safety; is that correct?</p> <p>12 A. That's correct.</p> <p>13 Q. And that remains Deputy Mayor</p> <p>14 Brown?</p> <p>15 A. That's -- yes, correct.</p> <p>16 Q. And then you have -- well, this is</p> <p>17 not a fair question, but there's -- I see at</p> <p>18 least four direct reports under you? The</p> <p>19 chief -- or the heads of each of the different</p> <p>20 branches identified here in --</p> <p>21 A. Yes.</p> <p>22 Q. -- Defendants' Exhibit 1?</p> <p>23 A. At least.</p> <p>24 Q. At least.</p> <p>25 How often do you interact with</p>
<p style="text-align: right;">Page 47</p> <p>1 Q. Do you serve at the mayor's</p> <p>2 pleasure, or is it subject to a contract term</p> <p>3 length?</p> <p>4 MS. LEYIMU: Object to the form.</p> <p>5 A. It is at the mayor's pleasure.</p> <p>6 Q. All right, Chief. So if I have my</p> <p>7 story straight, and I may not, am I correct</p> <p>8 that throughout your career at AFD, you have</p> <p>9 always been in a position within the operations</p> <p>10 subdivision prior to your promotion to chief?</p> <p>11 A. Yes and no. It's more complicated.</p> <p>12 Q. I know you described earlier there</p> <p>13 was a period when you moved around from</p> <p>14 different roles.</p> <p>15 A. Well, okay. Being assigned in the</p> <p>16 operations subdivision, you still have to serve</p> <p>17 as a paramedic, which is actually under the</p> <p>18 bureau of EMS, which actually goes through the</p> <p>19 administrative services -- administration,</p> <p>20 special services subdivision.</p> <p>21 There was a time when special --</p> <p>22 excuse me -- special operations was also under</p> <p>23 the administration and special services</p> <p>24 subdivision. Things have changed around over</p> <p>25 the years, over the past 20 years, so it's not</p>	<p style="text-align: right;">Page 49</p> <p>1 Deputy Mayor Brown?</p> <p>2 A. Probably three to four times a</p> <p>3 week.</p> <p>4 Q. About what types of subjects?</p> <p>5 A. Everything under the sun if it has</p> <p>6 to do with public safety.</p> <p>7 Q. Do you have any regularly scheduled</p> <p>8 meetings?</p> <p>9 A. With Deputy Mayor Brown, no. But</p> <p>10 he regularly attends some of the meetings that</p> <p>11 I hold with my staff.</p> <p>12 Q. How often do you hold staff</p> <p>13 meetings?</p> <p>14 A. Weekly.</p> <p>15 Q. And so Deputy Mayor Brown might</p> <p>16 drop in on those meetings occasionally?</p> <p>17 A. Yes.</p> <p>18 Q. Are there any written reports that</p> <p>19 you put together on a regular basis for Deputy</p> <p>20 Mayor Brown?</p> <p>21 A. No. When it's requested.</p> <p>22 Q. So when the deputy mayor asks you</p> <p>23 for certain statistics or whatnot, or reports,</p> <p>24 you may put it together for him?</p> <p>25 A. That's correct.</p>

<p style="text-align: right;">Page 50</p> <p>1 Q. But there's no standing report that 2 you generate?</p> <p>3 A. There is a -- like a dashboard we 4 have tried to prev- -- to present on a monthly 5 basis, but that's about it.</p> <p>6 Q. Is the dashboard you're referencing 7 intended for the deputy mayor, or is it kind of 8 a --</p> <p>9 A. For the deputy mayor, yes. 10 Information he's requested.</p> <p>11 Q. And it sounds as if it wasn't 12 necessarily every month --</p> <p>13 A. No.</p> <p>14 Q. -- but to the extent that there was 15 one generated, would it have come from you to 16 the deputy mayor?</p> <p>17 A. No. My subordinates would produce 18 it and submit it.</p> <p>19 Q. You might be cc'd on the --</p> <p>20 A. That is correct.</p> <p>21 Q. -- dashboard. Got it. 22 How about the mayor? Do you 23 interact with him much?</p> <p>24 A. A couple of times a month, 25 probably.</p>	<p style="text-align: right;">Page 52</p> <p>1 like Vicodin, heroin. There's a large list of 2 them. Fentanyl.</p> <p>3 Q. All right. We'll -- we'll talk 4 later about opioids, as you won't be surprised 5 to hear. But based on what -- I think we have 6 the same understanding what the word means.</p> <p>7 Do you -- do you recall having any 8 meetings with the deputy mayor about 9 opioid-related topics?</p> <p>10 A. I'm sure over the course of the 11 last few years, we've had many discussions, but 12 I couldn't bring any to -- I couldn't give you 13 specifics on any of them, really.</p> <p>14 Q. Have there been any -- any ad hoc 15 or regularly scheduled meetings that, to your 16 recollection, are specifically about opioids?</p> <p>17 MS. LEYIMU: Object to the form of 18 the question.</p> <p>19 A. Can you rephrase, please?</p> <p>20 Q. Yes. I should rephrase.</p> <p>21 Do you recall attending any 22 meetings with the deputy mayor that were 23 related exclusively to the subject of opioids?</p> <p>24 MS. LEYIMU: I'll object to the 25 form.</p>
<p style="text-align: right;">Page 51</p> <p>1 Q. And about what subjects?</p> <p>2 A. Everything to do with public 3 safety. Anything to do with public safety.</p> <p>4 Q. Who is the mayor now?</p> <p>5 A. Dan Horrigan.</p> <p>6 Q. Do you have any regularly scheduled 7 meetings with Mayor Horrigan?</p> <p>8 A. We go to breakfast about once a 9 month.</p> <p>10 Q. Does Mayor Horrigan ever drop in on 11 the weekly meetings you have with staff?</p> <p>12 A. Very rarely.</p> <p>13 Q. Do you generate any regular reports 14 for the mayor?</p> <p>15 A. No.</p> <p>16 Q. No dashboards or things of that 17 nature?</p> <p>18 A. No.</p> <p>19 Q. Chief, are you familiar with the 20 term "opioid"?</p> <p>21 A. I am.</p> <p>22 Q. And what do you understand that to 23 mean?</p> <p>24 A. It is a list of substances that 25 come from the poppy plant. It includes things</p>	<p style="text-align: right;">Page 53</p> <p>1 A. I'm sure we've had a few.</p> <p>2 Q. Anything specific come to mind?</p> <p>3 A. Just basically the -- you know, how 4 its affecting the Akron Fire Department was the 5 topic of conversation.</p> <p>6 Q. So to make sure I understand, you 7 recall at least one meeting with the deputy 8 mayor where the topic was how opiates are 9 affecting the Akron Fire Department?</p> <p>10 A. Correct.</p> <p>11 Q. Do you recall approximately when 12 that meeting was?</p> <p>13 A. I couldn't be exact.</p> <p>14 Q. Was it when you were chief?</p> <p>15 A. Yes.</p> <p>16 Q. Do you recall what precipitated the 17 meeting?</p> <p>18 A. The fact that we have been, over 19 the last few years, struggling to keep our 20 trucks on the road. We're -- we're running out 21 of units we are so busy.</p> <p>22 Q. Do you remember if you asked for 23 the meeting or if the deputy mayor asked for 24 the meeting?</p> <p>25 A. I couldn't recall.</p>

<p style="text-align: right;">Page 54</p> <p>1 Q. Do you remember how long it took, 2 the meeting was? 3 A. No. 4 Q. Okay. Besides that meeting with 5 the deputy mayor, do you recall any others that 6 were related exclusively to the subject of 7 opioids? 8 MS. LEYIMU: Object to the form. 9 Asked and answered. 10 A. I'm sure there were multiple 11 meetings with the same topic. 12 Q. You don't recall specifics of any 13 of those? 14 A. No. 15 Q. How about the mayor? Do you recall 16 any meetings with the mayor that were 17 exclusively about the subject of opioids? 18 A. No. 19 Q. You mentioned the dashboards 20 before. I think just to close it down, do you 21 generate or have you generated any regular 22 reports for the deputy mayor on the subject of 23 opioids? 24 A. Regular reports? No. 25 Q. Occasional reports?</p>	<p style="text-align: right;">Page 56</p> <p>1 to running out of units multiple times a week? 2 A. That is correct. 3 Q. You didn't have meetings multiple 4 times a week? 5 A. No. 6 Q. Do you recall approximately when 7 these worst times were? 8 A. Things seemed to peak in 9 approximately 2016 in what I would call this 10 opiate crisis. And at that time, multiple 11 times a week we would run out of units. 12 Q. This is in 2016? 13 A. That's correct. 14 Q. Do you recall approximately when in 15 2016? 16 A. Many times. 17 Q. Many times? 18 A. Many times. 19 Q. Is there a season or -- 20 A. No. 21 MS. LEYIMU: Object to the form. 22 Q. Besides the individuals we've 23 talked about, the deputy mayor and your 24 subordinates, are there any other individuals 25 or entities that you communicate with on the</p>
<p style="text-align: right;">Page 55</p> <p>1 A. There have been times when he has 2 requested current information so that he could 3 go out and speak to the public about it. And 4 in those instances, I simply asked the person 5 that's in charge of our EMS bureau to get those 6 numbers. 7 Q. Do any of the individuals that 8 report to you, your direct reports, generate, 9 on a regular basis, any type of reports or 10 records relating to opioids? 11 A. No. 12 Q. Fair to assume that you've received 13 occasional reports about opioids from your 14 direct reports? 15 MS. LEYIMU: Object to the form. 16 A. Occasional. 17 Q. Do you recall calling for or 18 attending any meetings with your subordinates 19 that were related exclusively to the subject of 20 opioids? 21 A. In some of our worst times when we 22 were running out of units multiple times a 23 week, then we've had discussions on opiates. 24 Q. The -- just want to make sure I 25 understand. The "multiple times a week" refers</p>	<p style="text-align: right;">Page 57</p> <p>1 topic of opioids? 2 MS. LEYIMU: Object to the form. 3 A. I'm sure that there have been 4 discussions with our medical director and 5 probably others. It's hard to say how many 6 conversations. 7 Q. Who's the medical director? 8 A. Dr. Amy Raubenolt. 9 Q. This is an individual who approves 10 your medical protocols? 11 A. That is correct. 12 Q. Chief, I believe you said that 13 the -- I'm sorry. 14 Anyone -- anyone else that you 15 communicate with frequently or regularly about 16 opioids? 17 MS. LEYIMU: Object to the form. 18 Asked and answered. 19 A. Not that I can recall. 20 Q. Chief, you said that the opiate 21 crisis peaked in 2016; is that right? 22 A. I believe so. 23 Q. I assume from that that things have 24 trended in a better direction since then? 25 MS. LEYIMU: Object to the form of</p>

15 (Pages 54 - 57)

<p style="text-align: right;">Page 58</p> <p>1 the question.</p> <p>2 A. The -- the issue seems to be that</p> <p>3 it -- it comes and goes. So there's -- it's</p> <p>4 almost like a wave. You know, there are peaks</p> <p>5 and there are valleys, and then it will peak</p> <p>6 again, and then there will be a valley again.</p> <p>7 Q. Since the peak that you referred to</p> <p>8 in 2016, has there been any other spikes that</p> <p>9 would reach that level that you saw in 2016?</p> <p>10 MS. LEYIMU: Object to the form.</p> <p>11 A. I'm sure there are.</p> <p>12 Q. Do you know for certain?</p> <p>13 A. I don't have specific data to back</p> <p>14 it up, no.</p> <p>15 Q. Fair to say that the worst is</p> <p>16 behind the Akron Fire Department in terms of</p> <p>17 the opiate crisis?</p> <p>18 MS. LEYIMU: Object to the form of</p> <p>19 the question.</p> <p>20 A. I really don't know. I can't</p> <p>21 really anticipate the future. I would hope the</p> <p>22 worst is behind us, but I have no idea.</p> <p>23 Q. Again, I think this is implicit in</p> <p>24 what you told me already, but just to be sure,</p> <p>25 you're not receiving regular reports about the</p>	<p style="text-align: right;">Page 60</p> <p>1 e-mail?</p> <p>2 A. That's correct.</p> <p>3 Q. But it's generated by the County?</p> <p>4 A. That is correct.</p> <p>5 Q. Do other individuals in your</p> <p>6 department receive that report?</p> <p>7 A. Yes.</p> <p>8 Q. Deputy Chief Twigg, I assume?</p> <p>9 A. Yes.</p> <p>10 Q. How about Chief Natko?</p> <p>11 A. Yes.</p> <p>12 Q. Do you know where the County is</p> <p>13 obtaining those statistics that it's reporting?</p> <p>14 A. I could not tell you. You'd have</p> <p>15 to ask those individuals that produce it.</p> <p>16 Q. Besides this report generated by</p> <p>17 the County on a -- did you say daily basis?</p> <p>18 A. Correct.</p> <p>19 Q. Besides this daily report, any</p> <p>20 other opiate-related reports that you're</p> <p>21 receiving?</p> <p>22 A. No.</p> <p>23 Q. So your department itself isn't in</p> <p>24 the -- isn't in the process -- or strike that.</p> <p>25 The Akron Fire Department or</p>
<p style="text-align: right;">Page 59</p> <p>1 number of opiate-related incidents to which</p> <p>2 your department is responding?</p> <p>3 MS. LEYIMU: Object to the form.</p> <p>4 Q. Is that fair?</p> <p>5 A. I receive a report on how many were</p> <p>6 reported in -- in the City of Akron, but we get</p> <p>7 that from the County. And all that information</p> <p>8 has been shared with our attorneys.</p> <p>9 Q. Is that a regular report or</p> <p>10 something else?</p> <p>11 MS. LEYIMU: Object to the form.</p> <p>12 A. There is what I would call like a</p> <p>13 daily report that comes out.</p> <p>14 Q. Do you know specifically what the</p> <p>15 daily report tracks?</p> <p>16 A. I could not tell you.</p> <p>17 Q. Something to do with -- with</p> <p>18 opiates?</p> <p>19 A. That's correct.</p> <p>20 Q. You don't know if it's, for</p> <p>21 example, overdoses versus number of incidents</p> <p>22 overall? Can't be sure?</p> <p>23 A. I think it has -- it probably has</p> <p>24 both figures.</p> <p>25 Q. This is a report that comes in your</p>	<p style="text-align: right;">Page 61</p> <p>1 individuals at Akron Fire Department are not</p> <p>2 generating reports for you about opiate</p> <p>3 incidents on a regular basis?</p> <p>4 A. I think that's correct.</p> <p>5 Q. The spike in 2016 that you referred</p> <p>6 to, do you recall if that came to your</p> <p>7 attention when you were still district chief,</p> <p>8 or was it after you were promoted to chief?</p> <p>9 A. For sure when I was still a</p> <p>10 district chief.</p> <p>11 Q. So even though you were in the fire</p> <p>12 prevention bureau, this type of intelligence</p> <p>13 about opiates still -- still reached you?</p> <p>14 A. Yes.</p> <p>15 Q. And how would that have happened?</p> <p>16 A. We have -- again, like I said, we</p> <p>17 have a weekly meeting with all of my department</p> <p>18 heads, and that was also the case prior to me</p> <p>19 becoming fire chief, we had a weekly meeting.</p> <p>20 As well as, from time to time, I</p> <p>21 would fill in out on the line as a district</p> <p>22 chief shift commander. So you're not always in</p> <p>23 your bureau. On occasions, you may need to</p> <p>24 fill in in other areas.</p> <p>25 Q. At any point when you've been on</p>

<p style="text-align: right;">Page 62</p> <p>1 the line, be it when you were a fire medic 2 starting out or after your promotions, have you 3 had occasion to respond to opiate overdoses? 4 A. I have. 5 Q. You've administered Narcan? 6 A. Yes. 7 Q. Any sense at all of approximately 8 how many incidents you've responded to? 9 A. No. 10 Q. Difficult to know? 11 A. Yeah. There are days when I've had 12 four or five runs, and there are days when I've 13 had 22 to 23 runs in a 24-hour period, so it's 14 just -- it's hard. It would be impossible 15 to tell you. 16 Q. Understood. You've had a long 17 career, so I -- 18 A. Yes. 19 Q. -- understand completely. 20 Let me try this. Do you have any 21 sense at all of when you first encountered an 22 opiate overdose when you were working at Akron 23 Fire Department? 24 A. I'm sure it was probably even prior 25 to me becoming a paramedic. Because prior to</p>	<p style="text-align: right;">Page 64</p> <p>1 Q. Have you spoken to the media about 2 any opioid-related topics? 3 A. I think I've discussed it at my 4 promotion ceremony even. 5 Q. Do you recall what you said? 6 A. That it was a crisis that we had to 7 address as a community, not as an individual 8 organization. 9 Q. This would have been -- 10 A. December of 2016. 11 Q. The date that you were promoted. 12 Did Chief -- I'm sorry -- Mayor 13 Horrigan had a ceremony to promote you? 14 A. Yes. 15 Q. Besides those comments at the 16 promotion ceremony, any other times you recall 17 speaking to the media about opioids? 18 A. No. 19 Q. If someone in the media had a 20 question about opiate incidents in Akron that 21 was directed to the AFD, who at AFD would be 22 the logical person to -- to respond? 23 A. One of our PIOs. 24 Q. Public information officer? 25 A. Correct.</p>
<p style="text-align: right;">Page 63</p> <p>1 the -- getting the certification as a 2 paramedic, we still filled in and rode 3 ambulances. So even prior to me becoming a 4 medic and throughout my career. 5 Q. So in -- even in those -- in that 6 first year or two of joining AFD, you recall 7 having opiate overdoses? 8 A. Correct. 9 Q. Okay. Now I'm stretching my luck, 10 but do you have any memory of the opioid that 11 was causing those overdoses? 12 A. None at all. 13 Q. Yeah, okay. 14 Earlier, I believe you said that 15 when you were in the bureau of fire prevention, 16 you talked to the media occasionally about 17 various topics: arson, public education. Did 18 I miss one? 19 A. Arson, public education, and 20 inspection. 21 Q. Inspections, thank you. 22 Since you've been promoted to 23 chief, do you talk to the media about issues 24 pertaining to the AFD? 25 A. Yes.</p>	<p style="text-align: right;">Page 65</p> <p>1 Q. If you -- if -- if the AFD received 2 a request for comment on an opiate-related 3 topic from the media, is a PIO, for example, 4 required to clear what they would say with you? 5 A. Not always. Sometimes. 6 Q. Are there occasions where they 7 would need to clear what they're saying with 8 the deputy mayor? 9 A. No. PIOs report directly to me. 10 Q. How do -- how many work at AFD? 11 A. We currently have two. 12 Q. Okay. Putting aside the media, 13 have you, to your recollection, made any other 14 public comments about opioids? For example at 15 a conference or any type of presentation like 16 that. 17 A. Not that I can recollect. 18 Q. While working at the Akron Fire 19 Department, Chief, have you received any 20 special commendations or awards? 21 A. Yes. 22 Q. And what are those? 23 A. There are numerous. 24 Q. Fair enough. I won't -- I won't 25 make you recite them.</p>

<p style="text-align: right;">Page 66</p> <p>1 The flip of that, have you ever 2 been disciplined at AFD? 3 A. Yes. 4 Q. And how many times? 5 A. I couldn't tell you exactly, but 6 it's less than five. 7 Q. At a high level, and to the best of 8 your recollection, can you give me a basic 9 rundown of the subject matter of those 10 disciplinary affairs? 11 A. Let's see. I think auto accident 12 was one, MVA, responding to an incident. 13 There haven't been -- there haven't 14 been very many. 15 Q. Yeah. Nothing else -- 16 A. Nothing else comes to mind. 17 Q. -- no other specifics? 18 A. No. 19 Q. Have you ever been suspended by 20 AFD? 21 A. No. 22 Q. Are there any -- anyone who works 23 at AFD who has a spotless record? 24 A. It may be possible, but it's 25 improbable.</p>	<p style="text-align: right;">Page 68</p> <p>1 Q. Okay. Besides that instance 2 testifying in that case, any other times when 3 you've testified in court? 4 A. No. 5 Q. Have you ever testified in what 6 I'll term an administrative proceeding? 7 A. Yes. 8 Q. And what -- what was that? 9 A. There have been times when the 10 union would file a grievance, and as a part of 11 administration, I would have to testify as to 12 not just my responsibility, but what the 13 current -- the current order of business was, 14 how do we operate. I had to do that a number 15 of times. 16 Q. Besides those grievances, any other 17 administrative proceedings where you've offered 18 testimony? 19 A. No. 20 Q. Have you ever testified in front of 21 an elected body, a legislature or that type of 22 thing? 23 A. No. 24 Q. Any commissions? 25 A. No.</p>
<p style="text-align: right;">Page 67</p> <p>1 Q. Understood. 2 All right, Chief. I asked you if 3 you -- maybe an hour ago -- if you'd been 4 deposed before. You said no; is that right? 5 A. Correct. 6 Q. Have you ever -- strike that. 7 In the lawsuit that we were 8 discussing and that I promised not to go into 9 with you, you didn't give any testimony in that 10 lawsuit? 11 A. I did give testimony, but it was 12 actually in court. There was not a deposition. 13 I actually testified in court. 14 Q. Understood. So that lawsuit went 15 to -- went to trial? 16 A. Yes. 17 Q. You were a witness for the 18 plaintiffs? 19 A. Actually -- 20 MS. LEYIMU: Object to the form. 21 Go ahead. 22 THE WITNESS: Excuse me. 23 A. Actually for the defendant. 24 Q. For the City? 25 A. Yes.</p>	<p style="text-align: right;">Page 69</p> <p>1 Q. Have you ever been involved in a 2 criminal matter? 3 A. No. 4 Q. Never been -- 5 A. Well, let me clarify. As a 6 paramedic, there have been some criminal cases 7 where I was testifying for the -- for the 8 prosecution. 9 Q. So you might have been a witness to 10 something? 11 A. Yes. Been a couple of rape cases 12 where I was the paramedic on scene and we had 13 to testify as to, you know, what we found, 14 what -- what occurred, our -- our interaction 15 with the -- the victim in that case. 16 Q. And this would be testimony you 17 offered at trial? 18 A. That is correct. 19 Q. Okay. So have you ever been 20 convicted of a crime? 21 A. No. 22 Q. Ever been charged with a crime? 23 A. No. 24 MR. LANNIN: You okay, Chief? We 25 can go a few more minutes? Or you want to take</p>

<p style="text-align: right;">Page 70</p> <p>1 five minutes?</p> <p>2 THE WITNESS: Actually, let's take</p> <p>3 a little break.</p> <p>4 MR. LANNIN: Sure.</p> <p>5 THE WITNESS: Thank you.</p> <p>6 THE VIDEOGRAPHER: Off the record,</p> <p>7 10:04.</p> <p>8 (A recess was taken.)</p> <p>9 - - - - -</p> <p>10 (Thereupon, Deposition Exhibit 2,</p> <p>11 Notice of Videotaped Deposition of</p> <p>12 Clarence Tucker, was marked for</p> <p>13 purposes of identification.)</p> <p>14 - - - - -</p> <p>15 THE VIDEOGRAPHER: We're back on</p> <p>16 the record, 10:20.</p> <p>17 BY MR. LANNIN:</p> <p>18 Q. Chief, the court reporter has just</p> <p>19 handed you a document that's been marked as</p> <p>20 Defendants' Exhibit 2.</p> <p>21 Do you recognize this document?</p> <p>22 A. Yes.</p> <p>23 Q. What is it?</p> <p>24 A. Notice of Deposition.</p> <p>25 Q. Have you seen it before?</p>	<p style="text-align: right;">Page 72</p> <p>1 Q. Forgive me. That first meeting in</p> <p>2 October, any recollection of how long the</p> <p>3 meeting lasted?</p> <p>4 A. A couple hours.</p> <p>5 Q. How about that second meeting?</p> <p>6 A. The same thing.</p> <p>7 Q. And when was the third?</p> <p>8 A. Yesterday.</p> <p>9 Q. How long was that?</p> <p>10 A. A couple hours.</p> <p>11 Q. Three meetings, a couple hours</p> <p>12 each, in each case just attorneys and -- and</p> <p>13 yourself present?</p> <p>14 A. Correct.</p> <p>15 Q. Any -- no additional meetings to</p> <p>16 prepare?</p> <p>17 A. No.</p> <p>18 Q. In those meetings with your</p> <p>19 lawyers, did you review any documents?</p> <p>20 A. Yes.</p> <p>21 Q. In each meeting or in only certain</p> <p>22 of them?</p> <p>23 A. I'm sure in each.</p> <p>24 Q. Did any of those documents refresh</p> <p>25 your recollection about the subject matter of</p>
<p style="text-align: right;">Page 71</p> <p>1 A. Yes.</p> <p>2 Q. Do you understand what it means?</p> <p>3 A. Yes.</p> <p>4 Q. This is simply the document that</p> <p>5 calls you to this deposition?</p> <p>6 A. Correct.</p> <p>7 Q. You can put that aside. I have no</p> <p>8 questions about it.</p> <p>9 What did you do to prepare for</p> <p>10 today's deposition?</p> <p>11 A. I had a few meetings with the</p> <p>12 attorneys here.</p> <p>13 Q. How many specifically?</p> <p>14 A. I believe around three.</p> <p>15 Q. Those were meetings with your</p> <p>16 attorneys in each case?</p> <p>17 A. That is correct.</p> <p>18 Q. In any of those meetings was there</p> <p>19 anyone else present?</p> <p>20 A. Other than attorneys? No.</p> <p>21 Q. Do you recall approximately when</p> <p>22 you had that first meeting?</p> <p>23 A. I believe around October, maybe.</p> <p>24 Q. How about the second one?</p> <p>25 A. Maybe a month later.</p>	<p style="text-align: right;">Page 73</p> <p>1 your testimony today?</p> <p>2 MS. LEYIMU: Object to the form.</p> <p>3 A. I can't recall.</p> <p>4 Q. You can't recall if --</p> <p>5 A. I can't recall specific information</p> <p>6 about it. I know what was -- of course it was</p> <p>7 due -- it was about this procedure, but I</p> <p>8 couldn't give you specifics.</p> <p>9 Q. Did -- let me try it a different</p> <p>10 way.</p> <p>11 Any recollection of any of the</p> <p>12 documents you looked at that you -- that was</p> <p>13 about something that you hadn't thought about</p> <p>14 in a while and that it refreshed you on that</p> <p>15 subject?</p> <p>16 MS. LEYIMU: Object to the form of</p> <p>17 the question.</p> <p>18 A. I think it was just general</p> <p>19 information about this litigation.</p> <p>20 Q. Have you spoken to anyone besides</p> <p>21 your attorneys about this deposition today?</p> <p>22 A. No.</p> <p>23 Q. Did you let your subordinates know,</p> <p>24 for example, that you would be at this</p> <p>25 deposition today?</p>

<p style="text-align: right;">Page 74</p> <p>1 A. Yes.</p> <p>2 Q. Did you discuss the subject of your</p> <p>3 testimony or likely testimony with them?</p> <p>4 A. No. Simply the amount of time that</p> <p>5 was expected to be here.</p> <p>6 Q. What was your estimate? Curious.</p> <p>7 All day?</p> <p>8 A. All day.</p> <p>9 Q. I'm doing my best here.</p> <p>10 All right. Besides the</p> <p>11 subordinates that you told that you would be</p> <p>12 out all day, anybody else that you spoke to</p> <p>13 about this deposition, besides your lawyers?</p> <p>14 A. My subordinates, as well as my --</p> <p>15 my boss. Deputy Mayor Brown knows I'm here as</p> <p>16 well.</p> <p>17 Q. And the same -- same idea --</p> <p>18 A. Yes.</p> <p>19 Q. -- just that you'd be here?</p> <p>20 Discuss the subject matter of your</p> <p>21 testimony?</p> <p>22 A. No.</p> <p>23 Q. How about your wife?</p> <p>24 A. She knows where I'm at.</p> <p>25 Q. Did you discuss the subject matter</p>	<p style="text-align: right;">Page 76</p> <p>1 A. That was the major topic.</p> <p>2 Q. Were you aware that Chief Twigg had</p> <p>3 been deposed in this case?</p> <p>4 A. Yes.</p> <p>5 Q. Did you discuss his deposition with</p> <p>6 him?</p> <p>7 A. I did.</p> <p>8 Q. What did you talk about?</p> <p>9 A. Basically that he would not be an</p> <p>10 all day.</p> <p>11 Q. Have you spoken with Chief Twigg</p> <p>12 about his deposition since Chief Twigg was</p> <p>13 deposed?</p> <p>14 A. Yes.</p> <p>15 Q. And what was the subject matter of</p> <p>16 that discussion?</p> <p>17 A. Actually, I called him to inform</p> <p>18 him about a firefighter that was actually in</p> <p>19 the hospital. And I assumed he was already at</p> <p>20 home, and he said, "No, I'm just leaving." So</p> <p>21 he -- he was still here. It was around 6:30, I</p> <p>22 believe.</p> <p>23 Q. On the day that he had been</p> <p>24 deposed?</p> <p>25 A. Correct.</p>
<p style="text-align: right;">Page 75</p> <p>1 of your testimony with her?</p> <p>2 A. I told her not to expect me before</p> <p>3 6:00.</p> <p>4 Q. Doing my best.</p> <p>5 Were you aware that Chief Natko had</p> <p>6 been deposed in this case?</p> <p>7 A. Yes.</p> <p>8 Q. Did you discuss his deposition</p> <p>9 with -- with Chief Natko?</p> <p>10 A. Not the specifics.</p> <p>11 Q. What did you discuss with him?</p> <p>12 A. That basically, again, the time.</p> <p>13 The amount of time it would take for this</p> <p>14 process.</p> <p>15 Q. Did he tell you how it went?</p> <p>16 MS. LEYIMU: Object to the form of</p> <p>17 the question.</p> <p>18 A. He said it was long.</p> <p>19 Q. Did he -- did he tell you the types</p> <p>20 of questions that we asked?</p> <p>21 MS. LEYIMU: Object to the form of</p> <p>22 the question.</p> <p>23 A. No.</p> <p>24 Q. Anything besides that it was a long</p> <p>25 day?</p>	<p style="text-align: right;">Page 77</p> <p>1 Q. Did he tell you the types of</p> <p>2 questions that we asked?</p> <p>3 A. No.</p> <p>4 Q. Did he tell you how it went?</p> <p>5 MS. LEYIMU: Object to the form.</p> <p>6 A. Other than -- he said it was a long</p> <p>7 day.</p> <p>8 Q. Same --</p> <p>9 A. A lot of questions.</p> <p>10 Q. Same basic message?</p> <p>11 A. Basically, yes.</p> <p>12 Q. Have you spoken to anyone else that</p> <p>13 to your knowledge has been deposed in this</p> <p>14 case?</p> <p>15 A. No. I'm not aware of who has been</p> <p>16 deposed.</p> <p>17 Q. Besides Chief Twigg and Natko?</p> <p>18 A. And Deputy Mayor Brown.</p> <p>19 Q. And do you recall approximately</p> <p>20 when you first learned that you were going to</p> <p>21 be deposed in this case?</p> <p>22 A. Approximately October of last year.</p> <p>23 Q. In preparing for this deposition,</p> <p>24 Chief, did you do any research on your own?</p> <p>25 A. A little.</p>

<p style="text-align: right;">Page 78</p> <p>1 Q. About what?</p> <p>2 A. Just the opiate crisis in general.</p> <p>3 Q. And how did you perform that</p> <p>4 research?</p> <p>5 A. Computer, Internet.</p> <p>6 Q. Internet searching?</p> <p>7 A. Yes.</p> <p>8 Q. Like on Google?</p> <p>9 A. Yes. Something to that effect. I</p> <p>10 don't think it was actually Google, but, yes.</p> <p>11 Q. What -- what prompted you to do</p> <p>12 that research?</p> <p>13 A. Well, if you're going to be</p> <p>14 involved in something, you need to make sure</p> <p>15 you have your information as current as</p> <p>16 possible.</p> <p>17 Q. Do you recall the specific types of</p> <p>18 information you were looking for when you went</p> <p>19 on the Internet?</p> <p>20 A. Yes. I actually was looking to see</p> <p>21 what all is considered an opiate.</p> <p>22 Q. In other words, what types of drugs</p> <p>23 would be considered an opiate?</p> <p>24 A. Correct.</p> <p>25 Q. Anything else that you recall</p>	<p style="text-align: right;">Page 80</p> <p>1 The Internet research that you did</p> <p>2 perform, was that at home or in your office?</p> <p>3 A. In my office.</p> <p>4 Q. Do you recall approximately how</p> <p>5 long you spent on that project?</p> <p>6 A. Five minutes.</p> <p>7 Q. Chief, what do you understand this</p> <p>8 litigation to be about?</p> <p>9 A. I understand this litigation to be</p> <p>10 about the opiate crisis that has really</p> <p>11 crippled not just my organization but many</p> <p>12 organizations' ability to get out and help the</p> <p>13 public.</p> <p>14 For the Akron Fire Department</p> <p>15 specifically, not only have we been running out</p> <p>16 of units and trying to keep more units on -- on</p> <p>17 the street, but our units have been needing to</p> <p>18 be serviced sooner just because of the -- the</p> <p>19 high mileage that our units are -- are</p> <p>20 encountering.</p> <p>21 It's about, basically, people</p> <p>22 dying. And people are dying. People are dying</p> <p>23 and -- and it's in astounding numbers. And</p> <p>24 don't get me wrong; people die all the time.</p> <p>25 But not in this kind of numbers. It appeared</p>
<p style="text-align: right;">Page 79</p> <p>1 looking for on the Internet?</p> <p>2 A. No.</p> <p>3 Q. Before you did that research, had</p> <p>4 you been familiar with the types of drugs that</p> <p>5 were classified as opiates?</p> <p>6 A. Yes.</p> <p>7 Q. So it was a refresher?</p> <p>8 A. Yes.</p> <p>9 Q. Did anyone ask you to perform that</p> <p>10 research, or was that on your own initiative?</p> <p>11 A. On my own initiative.</p> <p>12 Q. Besides that subject -- strike it.</p> <p>13 Already asked.</p> <p>14 Okay. So besides the Internet</p> <p>15 searching on different types of opiates, any</p> <p>16 other type of research that you did in</p> <p>17 preparation for this -- for this deposition,</p> <p>18 whether on the Internet or not?</p> <p>19 A. No.</p> <p>20 Q. You didn't go to the library, for</p> <p>21 example?</p> <p>22 A. No.</p> <p>23 Does anyone still do that?</p> <p>24 Q. That's a different deposition, I</p> <p>25 think.</p>	<p style="text-align: right;">Page 81</p> <p>1 to peak, like I said, in 2016.</p> <p>2 Q. And by it appearing to peak, you're</p> <p>3 referring to what you've called an opioid</p> <p>4 crisis?</p> <p>5 A. Correct.</p> <p>6 Q. Okay. So in the beginning of your</p> <p>7 answer, Chief, you referred to your</p> <p>8 organization being crippled and also other</p> <p>9 organizations. Do you have a sense of what</p> <p>10 those other organizations are?</p> <p>11 A. Other fire departments, health</p> <p>12 departments, and I'm sure other organizations</p> <p>13 as well. Police departments.</p> <p>14 Q. So it's your view that the Akron</p> <p>15 Fire Department -- strike that.</p> <p>16 It's your view that the opiate</p> <p>17 crisis has crippled the ability of the Akron</p> <p>18 Fire Department to respond to emergencies in</p> <p>19 the city?</p> <p>20 A. Yes.</p> <p>21 Q. Is the Akron Fire Department</p> <p>22 crippled today?</p> <p>23 A. When you say -- when I say</p> <p>24 "crippled," I mean, we are -- we run out of</p> <p>25 units. When they're at the high tide that I</p>

<p style="text-align: right;">Page 82</p> <p>1 had described before occurs, we run out of 2 units, and as many as three to four times a 3 week where we have one unit left in the city or 4 no units left in the city able to respond, and 5 that's a -- a -- a huge issue for us. 6 Q. Do you recall the last time that 7 the AFD experienced what you've referred to as 8 a high tide of this nature? 9 A. I couldn't be specific. 10 Q. Was it this year? Understanding -- 11 A. Well, this is 2019. 12 Q. -- we're only -- understanding 13 we're only a few weeks in. Has there been a 14 high tide in 2019? 15 A. I'm not sure. 16 Q. How about last year? Do you 17 remember any -- any what you called a high 18 tide? 19 A. I'm sure we had, but I couldn't be 20 specific as to when. 21 Q. Chief, what do you understand the 22 City and the Plaintiffs in this case to be 23 seeking? 24 A. Change. They're seeking change. 25 They're seeking, I think, a monetary value for</p>	<p style="text-align: right;">Page 84</p> <p>1 A. We've had to change how we do 2 business a little bit. The Quick Response Team 3 is something that we decided to implement in 4 response to this issue, where we would send a 5 paramedic, a police officer, and someone from 6 the health organization out to -- like a 7 counselor out to speak with individuals that 8 have had these overdoses and try to talk them 9 into going into counseling. So we've added 10 that additional unit. 11 And I'm sorry. Rephrase your 12 question, please. Repeat the question. 13 Q. So earlier you had mentioned 14 running out of units -- 15 A. Yes. 16 Q. -- and the cost of servicing 17 vehicles. 18 A. Yes. 19 Q. And you just discussed what -- the 20 Quick Response Team. 21 My question was, are there other 22 ways in which what you've termed to be an 23 opiate crisis has -- 24 A. Yes. 25 Q. -- affected the Akron Fire</p>
<p style="text-align: right;">Page 83</p> <p>1 the -- the cost that this crisis has -- has put 2 as a burden on the City and the County. 3 Q. What type of changes are the 4 Plaintiffs seeking? 5 A. More control over these supposedly 6 controlled substances. 7 Q. And what would that look like in 8 practice? 9 MS. LEYIMU: Object to the form of 10 the question. 11 A. I couldn't tell you. I couldn't 12 tell you what that would look like. 13 Q. Any other changes that you believe 14 the City or the Plaintiffs in this case to be 15 seeking? 16 MS. LEYIMU: Object to the form. 17 A. Besides change and monetary? I 18 don't know. 19 Q. Chief, earlier you mentioned that 20 AFD has been running out of units and that they 21 need to be serviced sooner. 22 A. Correct. 23 Q. Are there other ways in which what 24 you've called an opiate crisis has affected the 25 Akron Fire Department?</p>	<p style="text-align: right;">Page 85</p> <p>1 Department? 2 A. And I'm sure there are other ways, 3 but those are the major ways. 4 Q. Forgive me if I asked, but does the 5 Akron Fire Department currently have sufficient 6 personnel to respond to the city's needs? 7 MS. LEYIMU: Object to the form. 8 A. That's an interesting question. We 9 currently are responding to nearly 50,000 calls 10 a year. And depending on the type of an 11 emergency, we may need fewer or more units to 12 respond to each individual situation. So no 13 individual -- no -- no two emergencies are the 14 same. 15 Some EMS calls are going to require 16 more than one unit, and obviously fire calls 17 require multiple units to respond. It just 18 depends on the type of an emergency. 19 Q. If the mayor asked you today, 20 Chief, if the -- if the fire department 21 staffing level was endangering citizens in the 22 city, how would you respond? 23 MS. LEYIMU: Object to the form of 24 the question. 25 A. Is the staffing levels endangering</p>

<p style="text-align: right;">Page 86</p> <p>1 our citizens? Is that your question?</p> <p>2 Q. Correct.</p> <p>3 A. I think it's -- it's -- it's more</p> <p>4 complicated than that, to be perfectly honest.</p> <p>5 Depending on what type of emergencies that may</p> <p>6 occur, say, today, you know, a certain number</p> <p>7 may be just fine because we don't have any</p> <p>8 instant -- incidents that require us to go over</p> <p>9 and beyond the number of staffing we have at</p> <p>10 work today.</p> <p>11 Other incidents, a five-alarm fire</p> <p>12 for an example, would require a large majority</p> <p>13 of our resources that are at work today, as you</p> <p>14 can hear in the background.</p> <p>15 And other -- you know, while that</p> <p>16 type of emergency may be happening, other</p> <p>17 things are happening. You're still going to</p> <p>18 have heart attacks, strokes, car accidents.</p> <p>19 You're going to have the full gamut of other</p> <p>20 things happening.</p> <p>21 Frequently we'll have more than one</p> <p>22 fire or other types of emergencies all at the</p> <p>23 same time. It's -- it's not uncommon for us to</p> <p>24 have half of our units out at any given time.</p> <p>25 Q. So I understand that there may be</p>	<p style="text-align: right;">Page 88</p> <p>1 that we can go out on emergencies --</p> <p>2 emergencies as they occur. So you do the best</p> <p>3 you can with what you've -- you have.</p> <p>4 Q. Are you familiar with any instances</p> <p>5 where -- strike the question.</p> <p>6 Have there been any instances in</p> <p>7 which the Akron Fire Department has been unable</p> <p>8 to respond to an emergency because of a lack of</p> <p>9 available units?</p> <p>10 A. Yes.</p> <p>11 Q. About how many times has that</p> <p>12 happened?</p> <p>13 A. I couldn't tell you. But we do</p> <p>14 have mutual aid agreements so that we can call</p> <p>15 in surrounding communities to come in and help</p> <p>16 us when they exceed our ability to respond.</p> <p>17 Q. How frequently does Akron invoke</p> <p>18 that mutual aid?</p> <p>19 A. I really can't say how frequently.</p> <p>20 Just whenever needed.</p> <p>21 Q. So the question I asked, if there</p> <p>22 were instances when the AFD had been unable to</p> <p>23 respond to -- to emergencies --</p> <p>24 A. Yes.</p> <p>25 Q. -- and I asked you how many times,</p>
<p style="text-align: right;">Page 87</p> <p>1 occasions or days where there's a confluence of</p> <p>2 events that stretch resources.</p> <p>3 A. Sure.</p> <p>4 Q. But let's talk about 2018, for</p> <p>5 example. If we're looking at 2018 in general,</p> <p>6 when you -- when you've been chief, is it your</p> <p>7 judgment that in the aggregate for that year,</p> <p>8 the fire department had sufficient resources to</p> <p>9 address the city's needs?</p> <p>10 MS. LEYIMU: Object to the form of</p> <p>11 the question.</p> <p>12 A. I don't think it's a fair question</p> <p>13 because I think that, again, what's good enough</p> <p>14 to get us through today may not get us through</p> <p>15 what happens tomorrow. So it's -- it's more</p> <p>16 complicated.</p> <p>17 Q. Would you agree that in general the</p> <p>18 resources you've had have been good enough to</p> <p>19 get you through the days?</p> <p>20 MS. LEYIMU: Objection to form.</p> <p>21 A. There are times when our manpower</p> <p>22 has been sufficient, and there are times when,</p> <p>23 again, we run out of units, we're looking to</p> <p>24 bring in people on overtime, and we're trying</p> <p>25 to struggle to get units back in service so</p>	<p style="text-align: right;">Page 89</p> <p>1 you said, "I couldn't tell you." Why -- why is</p> <p>2 that?</p> <p>3 A. Because at any given time on any</p> <p>4 given day we may exceed our capacity to respond</p> <p>5 to any emergency, at any given time.</p> <p>6 You just heard sirens in the</p> <p>7 background just now, so there is at least an</p> <p>8 ambulance or two out there responding to an</p> <p>9 emergency as we speak. And I'm not sure if it</p> <p>10 was an ambulance or a fire truck. I couldn't</p> <p>11 tell you. But that takes away from your</p> <p>12 ability to have those units available until</p> <p>13 that emergency is over. Imagine that happening</p> <p>14 all across the city at the same time to where</p> <p>15 there's 13 or 14 incidents.</p> <p>16 It happens. And it only gets to</p> <p>17 something where it's reported to me is if it's</p> <p>18 happening more frequently. So I have people in</p> <p>19 place to deal with that type of an issue, and</p> <p>20 if it gets overwhelming, then my phone rings.</p> <p>21 Q. That would be the operations bureau</p> <p>22 who --</p> <p>23 A. Correct.</p> <p>24 Q. -- deals with that type of issue?</p> <p>25 Okay.</p>

<p style="text-align: right;">Page 90</p> <p>1 Chief, I want to ask you a series 2 of questions about different company names. 3 I'll read you the list of different names, and 4 for each I would just appreciate you telling me 5 if you've heard of that company, and if you 6 have, I'll ask you a few -- just a few short 7 follow-up questions about each. 8 A. Okay. 9 Q. The first is a company called 10 Discount Drug Mart. Have you heard of that? 11 A. I have. 12 Q. And what do you know about Discount 13 Drug Mart? 14 A. Absolutely nothing. 15 Q. You've heard the name? 16 A. Yes. 17 Q. But that's the extent of your 18 knowledge about it? 19 A. Yes. 20 Q. How about Cardinal Health? 21 A. No. 22 Q. AmerisourceBergen Drug Corporation? 23 A. No. 24 Q. H.D. Smith? 25 A. No.</p>	<p style="text-align: right;">Page 92</p> <p>1 A. No. 2 Q. To your knowledge, has anyone at 3 AFD spoken to anyone at Walgreens about an 4 opioid-related topic? 5 A. Not that I'm aware. 6 Q. How about a company called Janssen? 7 J-A -- 8 A. Spell that, please. 9 Q. J-a-n-s-s-e-n. 10 A. No. 11 Q. Endo? 12 A. No. 13 Q. Company called Insys, I-n-s-y-s, 14 Therapeutics? 15 A. No. 16 Q. Mallinckrodt? 17 A. No. 18 Q. Prescription Supply, Inc.? 19 A. No. 20 Q. McKesson? 21 A. I've heard of them. 22 Q. What have you heard about McKesson? 23 A. I think it was like a -- I think 24 they also provide some type of, like, medical 25 assistance. But I don't know anything about</p>
<p style="text-align: right;">Page 91</p> <p>1 Q. ANDA, A-N-D-A? 2 A. No. 3 Q. Purdue, P-u-r-d-u-e? 4 A. No. I assume you are referring to 5 the drug company? 6 Q. Correct, not -- 7 A. No. 8 Q. -- the chicken company. We've, 9 believe it or not, encountered that in other 10 depositions. 11 Actavis? 12 A. I've heard of the name. That's it. 13 Q. You don't know anything more about 14 it? 15 A. No. 16 Q. How about Cephalon? 17 A. No. 18 Q. Walgreens? 19 A. Yes. 20 Q. And what do you know about 21 Walgreens? 22 A. That they are a pharmacy. 23 Q. Have you ever had occasion to speak 24 to anyone at Walgreens about an opioid-related 25 topic?</p>	<p style="text-align: right;">Page 93</p> <p>1 the drug company, no. 2 Q. You've never had occasion to speak 3 to anyone at McKesson about opioids? 4 A. No. 5 Q. CVS? 6 A. Yes. 7 Q. What do you know about CVS? 8 A. It's a pharmacy in the Akron area. 9 Q. Ever spoken to anyone at CVS about 10 opioids? 11 A. No. 12 Q. HBC Service Company? 13 A. No. 14 Q. Rite Aid? 15 A. Only that it's a pharmacy in the 16 Akron area. 17 Q. Ever spoken to them about opioids? 18 A. No. 19 Q. Walmart? 20 A. Yes. 21 Q. What do you know about Walmart? 22 A. Excuse me? 23 Q. What do you know about Walmart? 24 A. That they are a discount store. 25 Q. Ever spoken to anyone at Walmart</p>

<p style="text-align: right;">Page 94</p> <p>1 about opiates?</p> <p>2 A. No.</p> <p>3 Q. Chief, to your knowledge, does the</p> <p>4 fire department have a records retention</p> <p>5 policy?</p> <p>6 A. A records retention policy? Yes.</p> <p>7 Q. Have you seen it?</p> <p>8 A. I have.</p> <p>9 Q. When did you last look at it?</p> <p>10 A. Oh, last year at some point.</p> <p>11 Q. What prompted you to look at it?</p> <p>12 A. We moved from our previous location</p> <p>13 to a new location, and before we made the move,</p> <p>14 we got rid of records that we didn't need to</p> <p>15 keep, according to our records retention</p> <p>16 policy.</p> <p>17 Q. When was -- when did you make that</p> <p>18 move?</p> <p>19 A. It was June or July-ish.</p> <p>20 Q. Of 2018?</p> <p>21 A. That's correct.</p> <p>22 Q. When you refer to location, is this</p> <p>23 the headquarters, for example, or --</p> <p>24 A. Yes. We're talking about fire</p> <p>25 department headquarters.</p>	<p style="text-align: right;">Page 96</p> <p>1 and destroyed?</p> <p>2 A. Some records were identified and</p> <p>3 destroyed.</p> <p>4 Q. Consistent with the records</p> <p>5 retention policy?</p> <p>6 A. That is correct.</p> <p>7 Q. Do you have any -- do you recall</p> <p>8 what -- what types of records those were that</p> <p>9 were destroyed?</p> <p>10 A. I couldn't tell you.</p> <p>11 Q. Was this something that you</p> <p>12 supervised, or was it a subordinate?</p> <p>13 A. Subordinates, and then the</p> <p>14 subordinates under them.</p> <p>15 Q. Were individual members of the fire</p> <p>16 department, including yourself, asked to purge</p> <p>17 records or -- or, you know, destroy old records</p> <p>18 in connection with the move to the new</p> <p>19 building?</p> <p>20 MS. LEYIMU: Object to the form of</p> <p>21 the question.</p> <p>22 A. Rephrase that, please.</p> <p>23 Q. All I mean is that, for example,</p> <p>24 often -- I'm moving offices next year, and</p> <p>25 they've already told me to destroy old records</p>
<p style="text-align: right;">Page 95</p> <p>1 Q. Is that building exclusive to the</p> <p>2 fire department?</p> <p>3 A. No.</p> <p>4 Q. Who else uses it?</p> <p>5 A. Oh, there are many agencies that</p> <p>6 were in our previous location, as well as in</p> <p>7 our new location.</p> <p>8 Q. How about the police department?</p> <p>9 A. Police department has stayed where</p> <p>10 they are currently, but they are not in the</p> <p>11 same building.</p> <p>12 Q. So to your knowledge, the police</p> <p>13 department didn't move last year?</p> <p>14 A. Say again.</p> <p>15 Q. The police department did not move</p> <p>16 last year?</p> <p>17 A. No.</p> <p>18 Q. Why did the fire department move?</p> <p>19 A. The building was sold.</p> <p>20 Q. Okay. So when you moved, the</p> <p>21 department went through the process of</p> <p>22 reviewing records that could or could not be</p> <p>23 destroyed in tandem with the move?</p> <p>24 A. That is correct.</p> <p>25 Q. And some records were identified</p>	<p style="text-align: right;">Page 97</p> <p>1 that they don't want to bother moving to the</p> <p>2 new office. So I'm just asking if that</p> <p>3 happened --</p> <p>4 A. Yes.</p> <p>5 Q. -- when you moved.</p> <p>6 And did you, Chief, destroy any</p> <p>7 documents in connection with that project?</p> <p>8 A. No.</p> <p>9 Q. So everything you had at the old</p> <p>10 building moved with you to the new one?</p> <p>11 A. No. I had other people -- I didn't</p> <p>12 destroy records. Other people, subordinates,</p> <p>13 came in.</p> <p>14 I can tell you this. We -- before</p> <p>15 we made the move, we had a discussion with our</p> <p>16 law department, and we had them go over once</p> <p>17 again what our record retentions policy is with</p> <p>18 our employees before records were even</p> <p>19 considered for being destroyed.</p> <p>20 Q. Okay. So I don't want to know</p> <p>21 what -- what the individuals from the law</p> <p>22 department told your employees specifically,</p> <p>23 but just to clarify, they -- they were -- those</p> <p>24 lawyers were involved in the process of</p> <p>25 determining which records to destroy or not?</p>

25 (Pages 94 - 97)

<p style="text-align: right;">Page 98</p> <p>1 A. Yes.</p> <p>2 MS. LEYIMU: Object to the form.</p> <p>3 Q. All right. And so I just want to</p> <p>4 clarify, make sure I understand.</p> <p>5 Do you, Chief, keep personal</p> <p>6 hard-copy documents in your office?</p> <p>7 A. Yes.</p> <p>8 Q. And when you were making the move</p> <p>9 from the old building to the new building, did</p> <p>10 you review the hard copy that you held at that</p> <p>11 time to see if anything could be destroyed</p> <p>12 before you moved?</p> <p>13 MS. LEYIMU: Object to the form.</p> <p>14 A. Personally, no. I have people who</p> <p>15 do that.</p> <p>16 Q. Your subordinates would have done</p> <p>17 that?</p> <p>18 A. Correct.</p> <p>19 Q. Did you -- were there ever any</p> <p>20 instances when you got to the new building and</p> <p>21 were looking for something that you thought you</p> <p>22 had and it turns out it had been destroyed?</p> <p>23 MS. LEYIMU: Object to the form of</p> <p>24 the question.</p> <p>25 A. No.</p>	<p style="text-align: right;">Page 100</p> <p>1 A. It was.</p> <p>2 Q. Do you do a lot of e-mailing?</p> <p>3 A. Yes.</p> <p>4 Q. Just part of the job?</p> <p>5 A. Yes.</p> <p>6 Q. Any -- any approximation of how</p> <p>7 many e-mails you send a day?</p> <p>8 A. No. Some -- it -- it ranges.</p> <p>9 Q. More than 10?</p> <p>10 A. Yes.</p> <p>11 Q. Substantially more than 10?</p> <p>12 A. Substantially.</p> <p>13 Q. And how about receiving e-mail? Do</p> <p>14 you receive quite a bit of e-mail during the</p> <p>15 day?</p> <p>16 A. Between 80 and 100 e-mails a day.</p> <p>17 Q. Okay. And to be clear, I'm talking</p> <p>18 about actual work-related e-mail, not spam or</p> <p>19 that type of thing.</p> <p>20 A. Well, that's all in -- it's all in</p> <p>21 there, so --</p> <p>22 Q. Yeah. Okay.</p> <p>23 A. -- there's some that is and some</p> <p>24 that isn't.</p> <p>25 Q. So how -- how would you describe</p>
<p style="text-align: right;">Page 99</p> <p>1 Q. Chief, do you have an e-mail</p> <p>2 account for work?</p> <p>3 A. Yes.</p> <p>4 Q. What is it?</p> <p>5 A. It is ctucker@akronohio.gov.</p> <p>6 Q. Do you recall when you first</p> <p>7 received an e-mail account in connection with</p> <p>8 your job at AFD?</p> <p>9 A. It was sometime in the '90s.</p> <p>10 Q. Have you had the same e-mail</p> <p>11 address the whole time?</p> <p>12 A. No. At some point, the City</p> <p>13 switched over the -- the end portion of what</p> <p>14 our e-mail account looks like.</p> <p>15 Q. The part after the "@" sign?</p> <p>16 A. Yes. There you go.</p> <p>17 Q. Do you recall when that switch</p> <p>18 happened?</p> <p>19 A. Honestly, no.</p> <p>20 Q. The "ctucker" part of your e-mail</p> <p>21 has remained the same?</p> <p>22 A. Correct.</p> <p>23 Q. When that switch happened, do you</p> <p>24 recall if the old e-mail was migrated to your</p> <p>25 new account?</p>	<p style="text-align: right;">Page 101</p> <p>1 your normal practice for dealing with e-mail?</p> <p>2 I know that's a general question.</p> <p>3 Do you --</p> <p>4 A. Right. What do you mean?</p> <p>5 Q. Do you have -- do you have an</p> <p>6 inbox?</p> <p>7 A. Yes.</p> <p>8 Q. Do you keep all your e-mail in an</p> <p>9 inbox, or do you, for example, sort it into</p> <p>10 folders?</p> <p>11 A. Well, actually, the way I use my</p> <p>12 e-mail is everything comes into the inbox,</p> <p>13 obviously, but then for things that I need to</p> <p>14 keep, I put them into separate folders.</p> <p>15 Q. For things that you don't look to</p> <p>16 keep, do you delete them?</p> <p>17 MS. LEYIMU: Object to the form.</p> <p>18 A. Usually, yes. Sometimes they get</p> <p>19 archived.</p> <p>20 Q. When you're moving items into these</p> <p>21 folders you mentioned, are there different --</p> <p>22 are the folders labeled with different subject</p> <p>23 matters?</p> <p>24 A. Yes.</p> <p>25 Q. Do you have a folder for any</p>

<p style="text-align: right;">Page 102</p> <p>1 opiate-related topics?</p> <p>2 A. I don't believe it's labeled as</p> <p>3 "Opiate." I believe it's labeled as "chief's</p> <p>4 folder."</p> <p>5 Q. Does that folder contain</p> <p>6 exclusive -- let me try again.</p> <p>7 Does that folder contain items that</p> <p>8 are exclusively related to opioids, or is it a</p> <p>9 hodgepodge of things?</p> <p>10 A. Hodgepodge.</p> <p>11 Q. But if you received an e-mail about</p> <p>12 opiates that you wanted to save, that would be</p> <p>13 the folder to which you moved it?</p> <p>14 MS. LEYIMU: Object to the form of</p> <p>15 the question.</p> <p>16 A. It would be in one of those folders</p> <p>17 that I would consider to be important to keep,</p> <p>18 so, yes.</p> <p>19 Q. And when you say "one of those</p> <p>20 folders," are there others in addition to the</p> <p>21 "chief's folder"?</p> <p>22 A. There is a folder that -- actually,</p> <p>23 there's multiple folders. There's lots of</p> <p>24 folders. So things that seem to fit into</p> <p>25 specific categories might go into those</p>	<p style="text-align: right;">Page 104</p> <p>1 long an archive you have of older e-mails?</p> <p>2 MS. LEYIMU: Object to the form.</p> <p>3 A. Really, no, to be perfectly honest.</p> <p>4 As your inbox would get full -- as my inbox</p> <p>5 would get full, there's a certain number of</p> <p>6 items that were not important enough to put</p> <p>7 over in specific folders that I simply archived</p> <p>8 in case I needed them later.</p> <p>9 Q. And the archive function, you've --</p> <p>10 you've referred to that a few times. Is that a</p> <p>11 manual function that you perform?</p> <p>12 A. It's an option in our Outlook that</p> <p>13 you can actually take -- I would imagine you</p> <p>14 know even more about this process than I do,</p> <p>15 I'm suspecting.</p> <p>16 But you pick a date that you say,</p> <p>17 okay, starting from here I want these items in</p> <p>18 the archive. You pick that date, you make that</p> <p>19 selection, and they go into that archive. And</p> <p>20 they're still available, obviously, if you need</p> <p>21 them. They're not deleted, but they're not</p> <p>22 sitting there in your inbox either.</p> <p>23 Q. Does -- does your inbox or your</p> <p>24 e-mail account have a size limit; do you know?</p> <p>25 A. It does.</p>
<p style="text-align: right;">Page 103</p> <p>1 specific folders, so -- but there's a list of</p> <p>2 them. And all of them have been made available</p> <p>3 to our attorneys.</p> <p>4 Q. All right. And how do you know</p> <p>5 that? Were you involved in the process of</p> <p>6 providing it to your attorneys?</p> <p>7 MS. LEYIMU: Object to the form of</p> <p>8 the question.</p> <p>9 A. I was not personally involved, but</p> <p>10 I know it was done.</p> <p>11 Q. Your inbox -- understanding you've</p> <p>12 moved some items to folders and delete others,</p> <p>13 sitting here today, any -- any guesstimate at</p> <p>14 all of how many items are in your inbox right</p> <p>15 now?</p> <p>16 A. A lot.</p> <p>17 Q. A lot?</p> <p>18 A. I couldn't tell you exactly how</p> <p>19 many.</p> <p>20 Q. More than 100?</p> <p>21 A. Yes.</p> <p>22 Q. More than 1,000?</p> <p>23 A. I don't think so.</p> <p>24 Q. Do you have any sense of how far</p> <p>25 back your e-mail goes? In other words, how</p>	<p style="text-align: right;">Page 105</p> <p>1 Q. Do you get a warning when you're</p> <p>2 approaching it?</p> <p>3 A. Yes.</p> <p>4 Q. And is that a reason to archive</p> <p>5 e-mails? Or delete e-mails?</p> <p>6 A. It could be.</p> <p>7 Q. The e-mail that's coming in during</p> <p>8 the day that we talked about and you're</p> <p>9 responding to, is that mostly internal e-mail</p> <p>10 from -- from the AFD, or is it broader than</p> <p>11 that?</p> <p>12 A. Both.</p> <p>13 Q. So e-mail from external --</p> <p>14 A. Correct.</p> <p>15 Q. -- individuals as well?</p> <p>16 Do you use your work e-mail for any</p> <p>17 personal reasons?</p> <p>18 A. No.</p> <p>19 Q. Do you have any sense at all of --</p> <p>20 of how much time you spend each day just</p> <p>21 dealing with e-mail?</p> <p>22 A. Too much. At least an hour.</p> <p>23 Q. An hour a day?</p> <p>24 A. Yes.</p> <p>25 Q. Believe it or not, I would love to</p>

<p style="text-align: right;">Page 106</p> <p>1 spend just an hour a day on e-mail. 2 Do you have a personal e-mail 3 account, Chief? 4 A. Yes. 5 Q. Do you use that for work ever? 6 A. No. 7 Q. How about a phone? Do you have a 8 cellular phone? 9 A. Yes. 10 Q. Do you have a device -- how many 11 devices do you have? 12 A. Two. 13 Q. Is one personal? 14 A. Yes. 15 Q. And the other is for work? 16 A. Correct. 17 Q. Does the City pay for your work 18 device? 19 A. Yes. 20 Q. What do you do -- what work 21 functions do you perform on your work device? 22 A. My work phone, it has my e-mail. 23 It has my calendar. And that's about it when 24 it comes to work functions. 25 Q. Is the e-mail and calendar on your</p>	<p style="text-align: right;">Page 108</p> <p>1 that's -- that's ill that's in the hospital. 2 Q. The individual -- 3 A. It's work-related information. 4 Q. The individual is an AFD employee? 5 A. Correct. 6 Q. Do you ever have what I'll call 7 more substantive discussions on texts with your 8 colleagues? 9 A. Such as? Give me an example. 10 Q. A fire happened, cause of a fire -- 11 A. Well -- 12 Q. -- a given emergency incident 13 happened, that type of thing. 14 A. -- our dispatch center will send me 15 a text message and give me a phone call for 16 anything that is a second-alarm fire or above. 17 Q. Is that an automatic function, or 18 is that just a standing request? 19 A. It is standing operating procedure. 20 Standard operation procedure. 21 Q. On your personal phone, do you ever 22 do any work functions? 23 A. No. 24 Q. If a colleague wanted to call you 25 on your cell, they use your work phone?</p>
<p style="text-align: right;">Page 107</p> <p>1 phone, basically a sync of your -- 2 A. It is. 3 Q. -- desktop? 4 A. Yes. 5 Q. Do you text at all for work? 6 A. Rarely. 7 Q. What types of things would you text 8 about? 9 A. Like, to my subordinates because 10 I'm going to be here today. If I'm going to be 11 coming in an hour or two late because I'm 12 stopping by another area. 13 Say I'm stopping by a fire station 14 instead of reporting directly downtown, then 15 I'll text my subordinates so that they know 16 basically how to find me. 17 Q. So ministerial kind of 18 whereabouts -- 19 A. Yes. 20 Q. -- texts, that type of thing? 21 A. Yes. The only other thing would 22 be -- well, another thing would be we have an 23 individual, like I said, that's in the hospital 24 right now, so I received a text from people 25 telling me the details about this individual</p>	<p style="text-align: right;">Page 109</p> <p>1 A. Correct. 2 MR. LANNIN: All right. This will 3 be Defendants' Exhibit 3. 4 - - - - - 5 (Thereupon, Deposition Exhibit 3, 6 6/3/2017 E-Mail from Richard Vober 7 Re: Overdose Calls, AKRON_000232538, 8 was marked for purposes of 9 identification.) 10 - - - - - 11 Q. Chief, as with all documents, 12 please take your time and just let me know when 13 you're ready to talk. 14 A. Yes, okay. 15 Q. You've seen this before? 16 It appears to be an e-mail from 17 Richard Vober to various individuals, including 18 yourself. 19 Do you see that? 20 A. Yes. 21 Q. Any reason to doubt that this is a 22 genuine e-mail? 23 A. None at all. 24 Q. Who is Richard Vober? 25 A. He is one of my deputy chiefs.</p>

<p style="text-align: right;">Page 110</p> <p>1 Q. And which bureau is he in charge 2 of? 3 A. He's in charge of operations. 4 Q. Okay. So as you can see on the 5 face of the document, Chief Tucker wants a text 6 notification sent whenever there's an overdose 7 involving a child. 8 Do you see that? 9 A. Yes. 10 Q. What -- what prompted that request? 11 A. Actually a discussion with my -- 12 with my boss. And this specific e-mail talks 13 about an overdose, but we've also talked about 14 the death of a child in a fire. At any point 15 in time if there is a death of a child, you 16 know, the mayor would like to be notified. 17 Q. Obviously death of a child could be 18 more of a high-profile incident for the bureau? 19 A. Yes. 20 Q. The department? 21 A. Yes. 22 Q. Are you familiar with any instances 23 where there was an overdose involving a child? 24 A. Yes. 25 Q. And what was that?</p>	<p style="text-align: right;">Page 112</p> <p>1 A. Not just an overdose. Again, a 2 death. 3 Q. Any death. 4 A. Or anything -- a serious injury. 5 It's the type of thing that -- that I want to 6 know and my -- my supervisors want to know. 7 Q. Are there any other types of 8 scenarios that you have a standing request to 9 be notified right away? 10 A. There is. Second-alarm fire or 11 greater. LVI, which is limited victim 12 incident, so anything more than five victims at 13 once. 14 So there are a number of situations 15 that our dispatch center or our shift commander 16 would be notifying me directly to let me know 17 that there was a -- what I consider to be a 18 large scale of importance of that happening. 19 Q. And an LVI incident could arise in 20 the context of a fire or a motor vehicle 21 accident? 22 A. It could be quite a few things, 23 yes. 24 Q. If you receive -- well, I gather 25 you have received texts pursuant to this</p>
<p style="text-align: right;">Page 111</p> <p>1 A. There have been -- there have been 2 multiple. 3 Q. That answers my question. 4 And these are instances where a 5 child died? 6 A. Yes. 7 Q. What -- what's the definition of 8 "child" in this context? 9 A. Just approximately 12 and under. 10 Q. There's various individuals on the 11 "to" line. Who -- who would be responsible for 12 sending a text to you if there had been an 13 overdose involving a child? 14 A. The first three individuals listed 15 on the "to" line here, at that point in time, 16 were shift commanders. 17 Oh, let's see here. And then you 18 see Deputy Chief Twigg, myself. 19 Q. James Willoughby, who's that? 20 A. He is currently a shift commander 21 as well. 22 Q. Understood. 23 So the instruction is if anyone 24 learns about an overdose involving a child, to 25 let you know, basically?</p>	<p style="text-align: right;">Page 113</p> <p>1 request? 2 A. Yes. 3 Q. Are you in the habit of saving 4 those on your phone? 5 A. I'm really bad at erasing text 6 messages, so probably most of them are saved. 7 Q. Would you say that you're using 8 texts with your colleagues -- or exchanging 9 texts with your colleagues on a daily basis or 10 less frequently? 11 A. Less frequently. 12 Q. Any sense of how frequently? 13 MS. LEYIMU: Object to the form. 14 A. Say again. 15 Q. Any sense of how frequently you do? 16 A. No. Again, it's under those 17 contexts of, you know, if there is something 18 important going on that they need to notify me 19 of, I'll receive a text message, and if it 20 escalates to a level higher than that, then 21 I'll receive a phone call. 22 Q. Chief, independent of the 23 department's records retention policy that we 24 discussed a few minutes ago, have you received 25 any type of notice or directive to preserve</p>

<p style="text-align: right;">Page 114</p> <p>1 records in connection with this litigation?</p> <p>2 A. Yes.</p> <p>3 Q. Do you recall when you received</p> <p>4 that?</p> <p>5 A. No, I don't.</p> <p>6 Q. You do recall reviewing it?</p> <p>7 A. Yes. That -- of course no records</p> <p>8 were be to -- to be destroyed.</p> <p>9 Q. And was that directive distributed</p> <p>10 in -- throughout your department?</p> <p>11 A. I think so.</p> <p>12 Q. Was the record -- was the directive</p> <p>13 to preserve records related to this litigation,</p> <p>14 did you receive it before or after the</p> <p>15 department moved from the old building to the</p> <p>16 new building?</p> <p>17 A. I believe it was before.</p> <p>18 Q. Was that records -- was that</p> <p>19 directive considered in connection with the</p> <p>20 move to the new building?</p> <p>21 MS. LEYIMU: Object to the form.</p> <p>22 Asked and answered.</p> <p>23 A. No.</p> <p>24 Q. So the move -- I'm trying to</p> <p>25 understand. When the department was preparing</p>	<p style="text-align: right;">Page 116</p> <p>1 may have been destroyed in connection with the</p> <p>2 move that are, in fact, subject to that</p> <p>3 litigation hold?</p> <p>4 MS. LEYIMU: Object to the form of</p> <p>5 the question.</p> <p>6 A. No.</p> <p>7 Q. And that's because, in your view,</p> <p>8 the department-wide records retention policy</p> <p>9 encompasses the litigation hold?</p> <p>10 A. That is cor- --</p> <p>11 MS. LEYIMU: Object to the form.</p> <p>12 A. That is correct.</p> <p>13 Q. To your knowledge, has anyone ever</p> <p>14 compared the two to make sure that's the case?</p> <p>15 MS. LEYIMU: Object to the form.</p> <p>16 A. Please restate your question.</p> <p>17 Q. Right. Have -- let me try it this</p> <p>18 way. Have you personally compared the</p> <p>19 department-wide records retention policy with</p> <p>20 the litigation hold you received to ensure</p> <p>21 that, in fact, the litigation hold was covered</p> <p>22 by the records retention policy?</p> <p>23 A. I don't believe I had to because</p> <p>24 our records retention policy keeps records for</p> <p>25 years, not -- there's not months. So it's well</p>
<p style="text-align: right;">Page 115</p> <p>1 to move from the old to the new building --</p> <p>2 A. Yes.</p> <p>3 Q. -- and there was a records -- there</p> <p>4 was a process of destroying records --</p> <p>5 A. Yes.</p> <p>6 Q. -- at that time, was the</p> <p>7 instructions in the litigation hold that you</p> <p>8 received considered as part of what was</p> <p>9 destroyed or not?</p> <p>10 MS. LEYIMU: Object to the form.</p> <p>11 Asked and answered.</p> <p>12 A. Actually our records retention</p> <p>13 policy is -- it's -- it's bigger than just this</p> <p>14 particular issue. It's department-wide. There</p> <p>15 are many items that we have to retain, so it --</p> <p>16 it encompasses far more than just the -- this</p> <p>17 opiate issue.</p> <p>18 Q. I understand. But to your</p> <p>19 knowledge, no one -- no one looked at the</p> <p>20 records retention directive that you received</p> <p>21 for this litigation at that time of the move</p> <p>22 and said these can go, these can't go, these</p> <p>23 must be saved?</p> <p>24 A. No.</p> <p>25 Q. Do you have any concern that items</p>	<p style="text-align: right;">Page 117</p> <p>1 over a year that our -- that any records need</p> <p>2 to be kept for -- for any of our divisions.</p> <p>3 Q. So I understand you didn't; to your</p> <p>4 knowledge, did anyone do that exercise of</p> <p>5 comparing the two?</p> <p>6 MS. LEYIMU: Object to the form of</p> <p>7 the question.</p> <p>8 A. You would have to ask our law</p> <p>9 department.</p> <p>10 Q. Earlier you mentioned that you were</p> <p>11 confident that your e-mail and other materials</p> <p>12 had been provided to your attorneys for</p> <p>13 production in this case; is that right?</p> <p>14 A. That is correct.</p> <p>15 Q. Do you understand that -- that the</p> <p>16 Defendants in this case had requested a variety</p> <p>17 of records from the Akron Fire Department on</p> <p>18 subjects that are relevant to this litigation?</p> <p>19 A. Yes.</p> <p>20 Q. Are you confident that all of the</p> <p>21 materials that the Defendants had requested</p> <p>22 have, in fact, been produced to your lawyers?</p> <p>23 A. I am.</p> <p>24 Q. There were no categories of records</p> <p>25 or things like that that you just didn't have</p>

<p style="text-align: right;">Page 118</p> <p>1 or were concerned weren't produced?</p> <p>2 A. No.</p> <p>3 Q. Does the Akron Fire Department</p> <p>4 produce an annual report?</p> <p>5 A. We do.</p> <p>6 Q. And it is, in fact, on an annual</p> <p>7 basis?</p> <p>8 A. Yes.</p> <p>9 Q. When was the last one; do you</p> <p>10 recall?</p> <p>11 A. I believe the last one that was</p> <p>12 actually completed was 2015. I believe we're</p> <p>13 working on 2016 as we speak.</p> <p>14 Q. Is it normal to have that kind of</p> <p>15 lag?</p> <p>16 A. Define "normal."</p> <p>17 Q. Your -- your point is well taken.</p> <p>18 Why -- let me try it this way. I</p> <p>19 would expect that an annual report, for</p> <p>20 example, for 2018 would be in process or</p> <p>21 available right now. And I believe you said</p> <p>22 you're working perhaps on 2016 now?</p> <p>23 A. That is correct.</p> <p>24 Q. Why -- why the lag?</p> <p>25 A. Well, the lag -- we have</p>	<p style="text-align: right;">Page 120</p> <p>1 THE VIDEOGRAPHER: Can I change</p> <p>2 media?</p> <p>3 MR. LANNIN: Yep. Go off the</p> <p>4 record.</p> <p>5 THE VIDEOGRAPHER: Off the record</p> <p>6 at 11:12.</p> <p>7 (A recess was taken.)</p> <p>8 THE VIDEOGRAPHER: We're back on</p> <p>9 the record, 11:30.</p> <p>10 BY MR. LANNIN:</p> <p>11 Q. Chief, earlier this morning I asked</p> <p>12 you if you understood what I meant when I used</p> <p>13 the word "opioid." Do you remember that?</p> <p>14 A. Yes.</p> <p>15 Q. And I believe you volunteered a</p> <p>16 couple of opiates that came to mind: heroin</p> <p>17 Vicodin, and fentanyl. Do you remember that?</p> <p>18 A. I do.</p> <p>19 Q. Are there any other types of</p> <p>20 opiates that you can think of? Or names of</p> <p>21 opiates?</p> <p>22 A. There are -- there -- there's a</p> <p>23 pretty good-sized list, actually. I can't</p> <p>24 think of them by -- you know, by name as we</p> <p>25 speak at this moment, but there's a good-sized</p>
<p style="text-align: right;">Page 119</p> <p>1 traditionally had a bit of a lag because all of</p> <p>2 the data that needs to be pulled comes from</p> <p>3 multiple sources.</p> <p>4 Q. Do you have a role in -- in</p> <p>5 drafting anything for the annual report?</p> <p>6 A. There's a letter from me in it,</p> <p>7 yes.</p> <p>8 Q. I assume your subordinates generate</p> <p>9 individual sections of the annual report?</p> <p>10 A. That is correct.</p> <p>11 Q. And, Chief, I -- I can represent to</p> <p>12 you that we looked on the website, and the last</p> <p>13 report there is from 2014.</p> <p>14 A. Okay.</p> <p>15 Q. Do you -- do you for sure know</p> <p>16 there's a 2015 report, or is that --</p> <p>17 A. There is.</p> <p>18 Q. There is? And if we wanted to</p> <p>19 obtain a copy of that report, who in your</p> <p>20 department would be the right person to ask?</p> <p>21 A. I would say District Chief Steve</p> <p>22 Kaut, who is in charge of accounting.</p> <p>23 Q. And again, it's your best sense</p> <p>24 that the 2016 report is still in progress?</p> <p>25 A. Yes.</p>	<p style="text-align: right;">Page 121</p> <p>1 list of them. Many of them are prescription</p> <p>2 drugs for pain.</p> <p>3 Q. And the others are not?</p> <p>4 A. Some aren't. Heroin is not,</p> <p>5 obviously.</p> <p>6 Q. Heroin is an illegal drug?</p> <p>7 A. Yes.</p> <p>8 Q. Do you know what category fentanyl</p> <p>9 falls into?</p> <p>10 A. Fentanyl is a drug as well. But if</p> <p>11 you are asking me if it's a legal or illegal</p> <p>12 drug, there may be some legal uses for it.</p> <p>13 Treatment of animals or whatever. I don't</p> <p>14 know.</p> <p>15 Q. Chief, have you heard of</p> <p>16 carfentanil?</p> <p>17 A. I have.</p> <p>18 Q. What do you understand carfentanil</p> <p>19 to be?</p> <p>20 A. Typically a drug treated -- that's</p> <p>21 used to treat animals.</p> <p>22 Q. Is it a type of opiate?</p> <p>23 A. It is.</p> <p>24 Q. Do you have an understanding if</p> <p>25 it's prescription or -- or otherwise?</p>

<p style="text-align: right;">Page 122</p> <p>1 A. I would imagine if you're treating 2 an animal with it and it is not illegal, then 3 it took, you know, a -- a doctor or some 4 type -- some type of medical expertise to be 5 able to prescribe it or administer it. 6 Q. Besides heroin, fentanyl, 7 carfentanil, any other types of opiates come to 8 mind that may be used illegally or may be 9 classified as illegal opiates? 10 A. I don't remember the entire list, 11 but there may be. 12 Q. And in terms of what I believe you 13 called prescription drugs -- 14 A. Yes. 15 Q. -- any -- any in particular that 16 come to mind? 17 A. OxyContin, Vicodin, and there are 18 others. 19 Q. How are you familiar with OxyContin 20 in particular? 21 A. That's one that I -- was actually 22 prescribed for me back many years ago when I 23 injured my back. 24 Q. Did you take the medicine? 25 A. It's funny you asked. I injured my</p>	<p style="text-align: right;">Page 124</p> <p>1 you know, "a car while you're under the 2 influence of this medication." Something to 3 that effect. 4 Q. So after you took one pill, you 5 decided you didn't care for the effect of 6 the -- of the medicine? 7 A. Right. 8 Q. And went back and got a different 9 one? 10 A. Yes. 11 Q. Did the alternative that he 12 prescribed, that -- that worked better for you? 13 MS. LEYIMU: Object to the form. 14 A. It did not -- it did not 15 incapacitate me for a half a day. I didn't 16 wake up, you know, eight hours later. 17 Q. Do you recall what you did with the 18 remaining pills from your original OxyContin 19 prescription? 20 A. Talking about back in the '90s. I 21 know it was disposed of, but I couldn't tell 22 you the -- the method. 23 Q. You didn't hang on to them in your 24 medicine cabinet? 25 A. No, no.</p>
<p style="text-align: right;">Page 123</p> <p>1 back actually on the job probably in the mid to 2 late '90s and was prescribed OxyContin as a -- 3 for the pain. And after taking one pill, it 4 knocked me out for like half a day, and so I 5 went back to my doctor and said, "I can't take 6 this. It's making me" -- "it's getting me to 7 the point where I'm just not functional." And 8 so I had him prescribe me something less potent 9 that was not an opiate. 10 Q. Do you recall what the doctor 11 prescribed for you? 12 A. Say again. 13 Q. Do you recall the other medicine 14 the doctor prescribed for you? 15 A. Offhand, no. 16 Q. When -- when the doctor prescribed 17 you the OxyContin, did he inform you that it 18 was an opiate? 19 A. I can't recall. I don't remember 20 hearing that. 21 Q. Do you recall if he informed you of 22 the potential effects of taking OxyContin? 23 A. I think there was a general 24 description saying don't drive. And it even 25 said, I think, on the bottle, "Do not drive,"</p>	<p style="text-align: right;">Page 125</p> <p>1 Q. This was in response to an injury 2 you had on the job? 3 A. That's correct. 4 Q. Your back? 5 A. Yes. 6 Q. Have there been any other instances 7 where you've been prescribed prescription 8 opiates? 9 A. Not that I can recall. As a matter 10 of fact, when -- you know, because I have a 11 recurring back issue now, you know, since I 12 hurt my back on the job, and each time I make 13 it very clear to my physician that, okay, we're 14 not going to -- you know, to an opiate. We're 15 going with something less potent. 16 Q. And your doctor obviously 17 accommodates your request? 18 A. That is correct. 19 Q. I asked if you had been prescribed 20 prescription opiates. Are there any other 21 instances -- putting aside -- putting that 22 question aside, have you ever used a 23 prescription opiate in another instance? 24 A. No. 25 Q. Besides the one oxy?</p>

<p style="text-align: right;">Page 126</p> <p>1 A. That's correct.</p> <p>2 Q. Have you ever used a</p> <p>3 nonprescription opioid?</p> <p>4 A. No.</p> <p>5 Q. Are you aware of any other</p> <p>6 employees at AFD who have been prescribed or</p> <p>7 used prescription opioids in connection with a</p> <p>8 work-related injury?</p> <p>9 MS. LEYIMU: Object to the form.</p> <p>10 A. Not -- none where I know the</p> <p>11 specifics. I'm sure there have been, but none</p> <p>12 where I know the specifics.</p> <p>13 Q. But in general it's your</p> <p>14 understanding that some employees have been</p> <p>15 prescribed or used prescription opioids?</p> <p>16 MS. LEYIMU: Object to form.</p> <p>17 A. I think there's a lot of people.</p> <p>18 Not just on AFD, but a lot of people that have</p> <p>19 had injuries where that was the -- the method</p> <p>20 that was prescribed to them, or I should say</p> <p>21 the -- the medication prescribed to them from</p> <p>22 their physician.</p> <p>23 Q. It seems to me, as with your own</p> <p>24 personal experience, that the type of work that</p> <p>25 AFD fire medics perform, for example, might</p>	<p style="text-align: right;">Page 128</p> <p>1 Q. Understood. You've never, to your</p> <p>2 knowledge, personally used Vicodin?</p> <p>3 A. No.</p> <p>4 Q. Has anyone else at AFD ever used</p> <p>5 Vicodin; do you know?</p> <p>6 MS. LEYIMU: Object to the form of</p> <p>7 the question. Asked and answered.</p> <p>8 A. I -- I would not want to make an</p> <p>9 assumption. We don't share medications,</p> <p>10 obviously.</p> <p>11 Q. And you're not privy -- in</p> <p>12 connection with your job, you're not privy to</p> <p>13 the medical records for the employees at AFD?</p> <p>14 A. That is correct. We have HIPAA</p> <p>15 laws in place, so we don't -- you know. I know</p> <p>16 if someone is -- is okay to return to duty, but</p> <p>17 I don't know specifics about their individual</p> <p>18 cases.</p> <p>19 Q. It's not something that you clear,</p> <p>20 a course of treatment or a prescription --</p> <p>21 A. Right.</p> <p>22 Q. -- things like that?</p> <p>23 A. Obviously not.</p> <p>24 Q. Okay. Besides the two prescription</p> <p>25 medicines -- strike -- strike it.</p>
<p style="text-align: right;">Page 127</p> <p>1 lead to injuries that would be treated with</p> <p>2 prescription opioids.</p> <p>3 So my question is, in general is</p> <p>4 it your sense that employees at AFD have</p> <p>5 received prescriptions for --</p> <p>6 MS. LEYIMU: Objection.</p> <p>7 Q. -- prescription opiates?</p> <p>8 MS. LEYIMU: Object to the form of</p> <p>9 the question.</p> <p>10 A. I don't think any more frequently</p> <p>11 than the rest of the population. You know, we</p> <p>12 have back injuries, neck injuries, shoulder</p> <p>13 injuries like everyone else.</p> <p>14 Q. Chief, you also mentioned Vicodin</p> <p>15 earlier. Is -- do you have a special</p> <p>16 familiarity with that medicine?</p> <p>17 A. No.</p> <p>18 Q. How did you know the name when</p> <p>19 asked if -- if you knew of any other</p> <p>20 prescription opiates?</p> <p>21 A. Well, you had -- we had talked</p> <p>22 about me pulling it up online, and it was one</p> <p>23 of the names that I recognized when I pulled it</p> <p>24 up online. I was like, oh, I've seen that many</p> <p>25 times before.</p>	<p style="text-align: right;">Page 129</p> <p>1 Do you have an understanding of</p> <p>2 whether cocaine is an opiate?</p> <p>3 A. I don't know if cocaine is or not.</p> <p>4 Q. How about methamphetamines?</p> <p>5 A. Methamphetamine I'm sure is not.</p> <p>6 Cocaine I don't believe is.</p> <p>7 Q. Cocaine you don't think so --</p> <p>8 A. I don't know. I'm not a --</p> <p>9 MS. LEYIMU: Object to the form.</p> <p>10 A. I'm not an expert on illicit drugs.</p> <p>11 Q. Understood. Just want to make sure</p> <p>12 our record is clear.</p> <p>13 For meth -- methamphetamines,</p> <p>14 you're sure that it's not an opiate?</p> <p>15 A. That is correct.</p> <p>16 Q. Chief, have you ever received any</p> <p>17 specific training that's related exclusively to</p> <p>18 opiates or treating opiates?</p> <p>19 A. Yes.</p> <p>20 Q. What was that?</p> <p>21 A. You're talking about when I was</p> <p>22 serving as a paramedic, so we're talking about</p> <p>23 back in the early '90s, and I couldn't give you</p> <p>24 specifics.</p> <p>25 Q. That training would have included,</p>

<p style="text-align: right;">Page 130</p> <p>1 for example, how to treat an overdose?</p> <p>2 A. Correct.</p> <p>3 Q. And back in -- back at this time in</p> <p>4 the '90s, was Narcan still the preferred remedy</p> <p>5 for an overdose?</p> <p>6 A. That is correct.</p> <p>7 Q. So your training, understanding it</p> <p>8 was a while ago, would have encompassed how to</p> <p>9 administer Narcan?</p> <p>10 A. That's correct.</p> <p>11 Q. Do you know the last time you</p> <p>12 personally dispensed Narcan to a patient?</p> <p>13 A. It would have been in the '90s, but</p> <p>14 I couldn't tell you a specific.</p> <p>15 Q. Besides that -- strike that.</p> <p>16 The -- the training on how to</p> <p>17 administer Narcan or respond to an overdose, is</p> <p>18 that part of the training that paramedics</p> <p>19 receive as part of the paramedic certification</p> <p>20 process?</p> <p>21 A. That's correct.</p> <p>22 Q. So putting aside the general</p> <p>23 paramedic training, have -- have you personally</p> <p>24 received any type of other special training or</p> <p>25 special coursework that's related to opiates in</p>	<p style="text-align: right;">Page 132</p> <p>1 Q. For example, the -- the nature of</p> <p>2 the what you've called an opiate crisis?</p> <p>3 A. Correct.</p> <p>4 Q. The scope of what you've called the</p> <p>5 crisis?</p> <p>6 A. That is correct.</p> <p>7 Q. You would agree that some opiates</p> <p>8 do have medically appropriate uses?</p> <p>9 MS. LEYIMU: Object to the form.</p> <p>10 A. I think control of pain is very</p> <p>11 necessary, you know, because pain can be</p> <p>12 extreme. And I think multiple forms of</p> <p>13 medication and different levels of medication,</p> <p>14 depending on the injury, would be appropriate,</p> <p>15 up to and including some opiate drugs.</p> <p>16 Q. So that the back injury you had and</p> <p>17 received the OxyContin for, in your -- in your</p> <p>18 view that -- the oxy wasn't what you wanted for</p> <p>19 that treatment, but there may be other types of</p> <p>20 patients who have different types of pains</p> <p>21 where opiates are a medically appropriate</p> <p>22 medicine?</p> <p>23 MS. LEYIMU: Object to the form of</p> <p>24 the question.</p> <p>25 MR. LANNIN: You know what? Strike</p>
<p style="text-align: right;">Page 131</p> <p>1 any way?</p> <p>2 MS. LEYIMU: Object to the form.</p> <p>3 A. I'm not sure of your question. Can</p> <p>4 you rephrase that?</p> <p>5 Q. Sure. And -- and correct me if --</p> <p>6 if I'm wrong, but my understanding is that</p> <p>7 paramedics receive a standard set of training</p> <p>8 that would include how to recognize an opioid</p> <p>9 overdose and -- and dispense Narcan; is that</p> <p>10 fair?</p> <p>11 A. That is fair.</p> <p>12 Q. So my question is, putting that</p> <p>13 aside, have you personally received any</p> <p>14 additional coursework or training on a subject</p> <p>15 related to opiates?</p> <p>16 A. Well, I routinely attend seminars,</p> <p>17 trainings. Such as there is a -- there's a --</p> <p>18 an annual chiefs' training that -- that I go to</p> <p>19 that, you know, actually moves around the</p> <p>20 country. But in those trainings or in those</p> <p>21 seminars, you will have perhaps an hour lecture</p> <p>22 on, you know, whatever topic under the sun that</p> <p>23 seems to be an issue for the fire service as we</p> <p>24 speak. And I'm sure I've attended more than</p> <p>25 one discussion about opiates.</p>	<p style="text-align: right;">Page 133</p> <p>1 the question. It was -- it was vague.</p> <p>2 THE WITNESS: Okay.</p> <p>3 Q. You're aware that Akron ambulances</p> <p>4 carry certain opiates?</p> <p>5 A. Akron ambulances carry certain</p> <p>6 opiates.</p> <p>7 Q. Are you aware of that?</p> <p>8 A. Are you referring to morphine?</p> <p>9 What are you referring to?</p> <p>10 Q. Let me ask it differently.</p> <p>11 Do you know if Akron ambulances</p> <p>12 carry certain opiates?</p> <p>13 A. Akron ambulances -- actually I'm</p> <p>14 not aware of what all drugs our ambulances</p> <p>15 carry now since I have not been a functioning</p> <p>16 paramedic since the mid-'90s. I know at one</p> <p>17 point we did carry morphine. What other</p> <p>18 controlled substances, I would not be aware of.</p> <p>19 Q. Would the medical director have to</p> <p>20 sign off on whatever prescriptions were car- --</p> <p>21 whatever medicines were stocked on an</p> <p>22 ambulance?</p> <p>23 A. That's correct.</p> <p>24 Q. Does the content of the medical</p> <p>25 protocol come to your attention for review?</p>

<p style="text-align: right;">Page 134</p> <p>1 A. The content? No.</p> <p>2 Q. That's -- that's delegated to the</p> <p>3 medical director?</p> <p>4 A. That is the medical director, and</p> <p>5 that is District Chief Joe Natko.</p> <p>6 Q. So you're not required to approve</p> <p>7 or not what medicines are carried on the</p> <p>8 ambulances?</p> <p>9 A. No. The actual medical director</p> <p>10 approves the drug list.</p> <p>11 Q. And -- and it's under the medical</p> <p>12 director's license that AFD paramedics and</p> <p>13 EMTs --</p> <p>14 A. That is their function.</p> <p>15 Q. -- administer care --</p> <p>16 A. That is correct.</p> <p>17 Q. Chief, sitting here today, do you</p> <p>18 know how many prescriptions for opioids were</p> <p>19 written in Akron last year?</p> <p>20 A. No idea.</p> <p>21 Q. Do you have any way to -- any sense</p> <p>22 of how you could figure that out?</p> <p>23 MS. LEYIMU: Object to the form.</p> <p>24 A. I don't know if we have access to</p> <p>25 that information or not. You talking about</p>	<p style="text-align: right;">Page 136</p> <p>1 those numbers?</p> <p>2 MS. LEYIMU: Object to the form.</p> <p>3 A. I don't know.</p> <p>4 Q. Chief, do you know anybody in your</p> <p>5 friends or family network who has had an issue</p> <p>6 with dependency on opiates?</p> <p>7 A. Yes.</p> <p>8 Q. May I ask, without names, the</p> <p>9 relationship?</p> <p>10 A. One was another City employee that</p> <p>11 was equal to my rank at that time but not a</p> <p>12 member of the Akron Fire Department. What he</p> <p>13 described for me was having a motor vehicle</p> <p>14 accident and opiates were prescribed for him as</p> <p>15 part of his pain management. He said he took</p> <p>16 the drugs -- drugs as prescribed until the</p> <p>17 point -- he reached a point where he was no</p> <p>18 longer needing to take those drugs.</p> <p>19 He then said that he couldn't</p> <p>20 figure out what was wrong with him. He -- he</p> <p>21 felt sick, he couldn't function, and he had no</p> <p>22 idea what was wrong with him, and then he</p> <p>23 realized, "You know what? I think I'm addicted</p> <p>24 to this substance."</p> <p>25 So, yes, I've -- I have that as</p>
<p style="text-align: right;">Page 135</p> <p>1 overall --</p> <p>2 Q. Yes.</p> <p>3 A. -- the number of opiate</p> <p>4 prescriptions? That's never been a question</p> <p>5 that has been brought to my attention, and I</p> <p>6 don't know.</p> <p>7 Q. Let me narrow it, then, a little</p> <p>8 bit. How about, do you know last year how many</p> <p>9 times AFD personnel dispensed an opiate to a</p> <p>10 patient?</p> <p>11 A. No.</p> <p>12 Q. Is that data available?</p> <p>13 A. I don't know. That's something I'd</p> <p>14 have to ask District Chief Joe Natko.</p> <p>15 Q. Chief Natko would be the right</p> <p>16 person?</p> <p>17 A. Correct.</p> <p>18 Q. And just a slight tweak on that</p> <p>19 question. Do you know how many times AFD</p> <p>20 personnel dispensed Narcan last year?</p> <p>21 A. No.</p> <p>22 Q. Ask Joe Natko?</p> <p>23 A. Yes.</p> <p>24 Q. Do you know one way or the other</p> <p>25 whether Chief Natko could -- could generate</p>	<p style="text-align: right;">Page 137</p> <p>1 someone that I've spoken to personally, that</p> <p>2 person, about his addiction, and he had to</p> <p>3 fight to get back, you know, to -- to not being</p> <p>4 addicted to be able to function.</p> <p>5 The other -- the other person that</p> <p>6 I know that has had an issue with opiates is</p> <p>7 one of my neighbors. A neighbor that's lived</p> <p>8 in my neighborhood for a couple of years. They</p> <p>9 have a -- a son who our EMS units respond to on</p> <p>10 a routine basis.</p> <p>11 Q. For overdoses? Overdosing?</p> <p>12 A. For overdoses.</p> <p>13 Q. Starting with the City employee you</p> <p>14 mentioned, you mentioned he was equal to your</p> <p>15 rank at that time. What --</p> <p>16 A. Correct.</p> <p>17 Q. What year are we talking about,</p> <p>18 approximately?</p> <p>19 A. 2016.</p> <p>20 Q. This individual had an accident and</p> <p>21 was prescribed an opiate. Do you know which</p> <p>22 one?</p> <p>23 A. I'm sorry. Say again.</p> <p>24 Q. I'm sorry. The -- you said the</p> <p>25 individual had an accident and was prescribed</p>

<p style="text-align: right;">Page 138</p> <p>1 an opiate for pain management?</p> <p>2 A. Correct.</p> <p>3 Q. Do you -- do you know which opiate</p> <p>4 in particular?</p> <p>5 A. No.</p> <p>6 Q. Prior to that prescription, do you</p> <p>7 know if this individual had used opiates</p> <p>8 before?</p> <p>9 A. I do not know.</p> <p>10 Q. You -- you said, Chief, that he</p> <p>11 reached the point where he no longer needed to</p> <p>12 take the drugs and then he started to feel --</p> <p>13 A. What he described as sick.</p> <p>14 Q. As sick. Is it at that point that</p> <p>15 he -- he sought help? Do you know?</p> <p>16 MS. LEYIMU: Object to the form.</p> <p>17 A. We did not get into the details of</p> <p>18 how he was able to either get treatment or seek</p> <p>19 treatment. We didn't talk about that aspect.</p> <p>20 We were simply talking about the ease in which</p> <p>21 he found himself addicted to prescription</p> <p>22 drugs.</p> <p>23 Q. And it was his assessment that --</p> <p>24 that he -- strike that.</p> <p>25 Do you know if he at any point used</p>	<p style="text-align: right;">Page 140</p> <p>1 A. It's like I kind of described</p> <p>2 before, in waves. Sometimes only once or twice</p> <p>3 a month, other times once or twice a week. It</p> <p>4 just depends.</p> <p>5 Q. Responding to -- to the son?</p> <p>6 A. That is correct.</p> <p>7 Q. As often as once or twice a week?</p> <p>8 A. Yes.</p> <p>9 Q. The EMS personnel are administering</p> <p>10 Narcan?</p> <p>11 A. I did not get into the details of</p> <p>12 the treatment for this particular individual.</p> <p>13 Q. Understood.</p> <p>14 Besides the City employee and your</p> <p>15 neighbor's son, any other -- any other</p> <p>16 individuals you've known to have an issue with</p> <p>17 opiate dependency?</p> <p>18 A. No.</p> <p>19 Q. Chief, do you think Akron has a</p> <p>20 cocaine problem right now?</p> <p>21 A. I think that's a very unorthodox</p> <p>22 question to ask when you -- does Akron have a</p> <p>23 cocaine problem? That's like saying does Akron</p> <p>24 have a heart attack problem. Well, if you're</p> <p>25 the person having a heart attack, it's a big</p>
<p style="text-align: right;">Page 139</p> <p>1 an illegal or illicit opiate?</p> <p>2 A. I don't believe so. I don't know</p> <p>3 for a fact because, again, I haven't known this</p> <p>4 individual my entire life, but that didn't</p> <p>5 strike me as the case.</p> <p>6 Q. So this is an individual who used</p> <p>7 prescription opiates, and -- and at that point,</p> <p>8 after ceasing the use, in his judgment, needed</p> <p>9 help?</p> <p>10 A. Yes.</p> <p>11 Q. Does this individual still work --</p> <p>12 does this individual still work for the City?</p> <p>13 A. No.</p> <p>14 Q. How did it come to be that this</p> <p>15 topic came up with him?</p> <p>16 A. Honestly, I don't remember.</p> <p>17 Q. Your son -- I'm sorry, your</p> <p>18 neighbor's son --</p> <p>19 A. Yes.</p> <p>20 Q. -- do you know what opiate he's</p> <p>21 using that's precipitating the overdoses?</p> <p>22 A. No.</p> <p>23 Q. When you said that the EMS units</p> <p>24 are responding to -- to the son on a routine</p> <p>25 basis, what does "routine" mean?</p>	<p style="text-align: right;">Page 141</p> <p>1 problem.</p> <p>2 So at least -- if -- are you</p> <p>3 talking about numbers? How many?</p> <p>4 Q. I understand it's a subjective</p> <p>5 term.</p> <p>6 A. Yes, yes.</p> <p>7 Q. So let's put it this way. We've</p> <p>8 talked about a crisis in other context today.</p> <p>9 A. Yes.</p> <p>10 Q. Do you think that Akron has an</p> <p>11 opiate crisis, as you use that term?</p> <p>12 A. I do.</p> <p>13 Q. I'm sorry. Has a cocaine crisis?</p> <p>14 A. No.</p> <p>15 And my reason for using the word</p> <p>16 "crisis" when describing the opiate issue, you</p> <p>17 know, I described it as a wave, but I don't</p> <p>18 know. It might even be more -- 2016 seemed</p> <p>19 more like a tsunami than -- than a wave. It</p> <p>20 was -- it was really bad.</p> <p>21 Q. That was for the -- for the</p> <p>22 opiate -- what you called an opiate crisis?</p> <p>23 A. That is correct.</p> <p>24 Q. Do your EMS paramedics or fire</p> <p>25 medics treat individuals for cocaine overdoses?</p>

<p style="text-align: right;">Page 142</p> <p>1 A. Sure.</p> <p>2 Q. But in your estimation, that</p> <p>3 doesn't rise to the level of the crisis that</p> <p>4 you described --</p> <p>5 A. It absolutely has not.</p> <p>6 Q. Has cocaine been -- have -- have</p> <p>7 your para- -- fire medics been treating cocaine</p> <p>8 incidents for as long as you've worked at Akron</p> <p>9 Fire Department?</p> <p>10 A. Yes.</p> <p>11 Q. Were there particular periods when</p> <p>12 cocaine issues spiked or -- or hit a peak, as</p> <p>13 you've said before?</p> <p>14 MS. LEYIMU: Object to the form.</p> <p>15 A. Not where it was brought to my</p> <p>16 attention.</p> <p>17 Q. In the '80s there wasn't a</p> <p>18 cocaine -- cocaine epidemic?</p> <p>19 MS. LEYIMU: Object to the form of</p> <p>20 the question.</p> <p>21 A. I wouldn't refer to it as an</p> <p>22 epidemic because it never reached the levels of</p> <p>23 what we're talking about, like for 2016.</p> <p>24 Has there been a cocaine problem?</p> <p>25 Not just in Akron, but seems like everywhere,</p>	<p style="text-align: right;">Page 144</p> <p>1 A. Meth, okay.</p> <p>2 Q. Is meth a problem in Akron?</p> <p>3 A. Meth is a problem everywhere.</p> <p>4 Q. Has it been getting worse?</p> <p>5 MS. LEYIMU: Object to the form of</p> <p>6 the question.</p> <p>7 A. It's difficult for me to answer,</p> <p>8 not being involved in the EMS system as -- as I</p> <p>9 was back when I was a paramedic, but it hasn't</p> <p>10 spiraled out of control.</p> <p>11 Q. Sitting here today, you don't have</p> <p>12 a sense of whether the number of meth-related</p> <p>13 incidents has been increasing or decreasing or</p> <p>14 staying the same?</p> <p>15 A. I do not have that --</p> <p>16 MS. LEYIMU: Object to the form.</p> <p>17 A. I do not have that data.</p> <p>18 Q. Any -- any anecdotal sense of the</p> <p>19 trend line for meth-related incidents?</p> <p>20 A. I'm sorry. Say that again, please.</p> <p>21 Q. I understand you may not have the</p> <p>22 data in front of you for the number of</p> <p>23 meth-related incidents, but I'm asking</p> <p>24 anecdotally if you have a general sense of</p> <p>25 whether the number of incidents has been</p>
<p style="text-align: right;">Page 143</p> <p>1 sure. Lots of other issues as well.</p> <p>2 The opiate issue is one issue, but</p> <p>3 it just seemed to raise to the level of just</p> <p>4 overwhelming our ability to respond.</p> <p>5 The other types of emergencies, be</p> <p>6 it cocaine, heart attack, be it bath salts,</p> <p>7 whatever, have we had those calls? Yes, but</p> <p>8 they have never overwhelmed our resources like</p> <p>9 this opiate issue has.</p> <p>10 Q. So the distinction is cocaine,</p> <p>11 heart attacks, bath salts, those types of</p> <p>12 incidents have remained largely stable?</p> <p>13 MS. LEYIMU: Object to the form of</p> <p>14 the question.</p> <p>15 A. I don't have the numbers to tell</p> <p>16 you exactly what they were, but again, nothing</p> <p>17 has -- as I stated before, nothing has risen to</p> <p>18 the -- the level of -- of -- of being a true</p> <p>19 what I would call disaster almost as the opiate</p> <p>20 crisis has in 2016. Starting around 2014, and</p> <p>21 it just built from there. To the point where</p> <p>22 it was really -- it has been really stressing</p> <p>23 our resources, our ability to respond,</p> <p>24 overwhelming our personnel.</p> <p>25 Q. How about meth?</p>	<p style="text-align: right;">Page 145</p> <p>1 increasing or decreasing or otherwise.</p> <p>2 A. I really couldn't tell you. I</p> <p>3 have -- I have no recollection of anyone</p> <p>4 mentioning anything about the increase of meth</p> <p>5 calls in Akron.</p> <p>6 Q. It's not -- not something that</p> <p>7 comes up in your weekly meetings with --</p> <p>8 A. No.</p> <p>9 Q. Casting back to when you started at</p> <p>10 Akron Fire --</p> <p>11 A. Yes.</p> <p>12 Q. -- was -- were there meth-related</p> <p>13 incidents even that far back?</p> <p>14 A. Yes.</p> <p>15 Q. Is it a heroin crisis in Akron?</p> <p>16 MS. LEYIMU: Object to the form of</p> <p>17 the question.</p> <p>18 A. There is heroin use in Akron just</p> <p>19 like there is everywhere. Is it an issue?</p> <p>20 Yes.</p> <p>21 But when I talk about a crisis, I'm</p> <p>22 talking about something that's causing</p> <p>23 large-scale numbers of both close calls and</p> <p>24 deaths. When I call something a crisis, I'm</p> <p>25 talking about something that for whatever</p>

<p style="text-align: right;">Page 146</p> <p>1 reason we as a community haven't been able to 2 solve, and it seemed -- seemed to have been 3 spiraling up and out of control. And I'm 4 referring to the opiate issue, and specifically 5 starting and up around 2014 is when it really 6 began to ramp up. 7 So what I call -- and I'm sorry. 8 Which -- you're talking about -- you weren't 9 talking about meth; you were talking about 10 what? 11 Q. Heroin. 12 A. Heroin. Is it an issue in Akron? 13 Absolutely. Is it something where these people 14 need absolute- -- some help? Yes, absolutely. 15 But has it risen to the point where I would 16 call it a crisis? No. 17 Q. Well, you -- you agree with me, 18 earlier, that heroin is a type of opiate, 19 correct? 20 A. Yes, it is. 21 Q. As is fentanyl and carfentanil? 22 A. Correct. 23 Q. So I'm trying to understand, when 24 you've referred repeatedly to an opiate 25 crisis --</p>	<p style="text-align: right;">Page 148</p> <p>1 that. Some people deal with it appropriately 2 by going into treatment. Other people deal 3 with it in inappropriate ways by trying to get 4 any medication they can, either over the 5 counter or other illicit drugs. 6 And again, I'm not a -- I'm not a 7 police officer, but we see it. We see it. 8 Q. Besides the individual that you 9 mentioned -- 10 A. Yes. 11 Q. -- and we talked about before, 12 what -- what's the other bases, if any, for 13 your view that the things that took it to 14 another level are the pills? 15 MS. LEYIMU: Object to the form. 16 A. I think there are different types 17 of people in this world that end up getting 18 addicted to drugs. There are people that 19 choose to do something illegal, take some 20 illegal substance for, you know, whatever 21 reason: to get high, to be accepted into 22 groups, whatever. And those people frequently 23 will find themselves addicted. 24 There's another set of people 25 that's much larger, that I think includes you</p>
<p style="text-align: right;">Page 147</p> <p>1 A. Yes. 2 Q. -- "opiate" is a diffuse term. 3 Which opiates in particular are causing or 4 precipitating the crisis? 5 MS. LEYIMU: Object to the form. 6 A. I think all of them combined 7 contribute to what I call a crisis. But what 8 seems to have taken things to another level are 9 the pills. And I'll give you an example of 10 what the individual that I described before 11 described for me. 12 If you have an individual that goes 13 to their doctor with a problem and you get 14 medication for that problem, you assume that I 15 can safely take this medication. And then when 16 I'm done with it, I will -- should have no -- 17 no effects that affect my life. It's there to 18 help me; it's not going to hurt me. 19 In so many cases in this opiate 20 crisis, it's very easy for someone to take 21 medication that's prescribed to them from their 22 doctor, take it exactly as it was prescribed, 23 and then when you think you're done with it, 24 now you've got a problem. You can't walk away. 25 You're addicted. And now you have to deal with</p>	<p style="text-align: right;">Page 149</p> <p>1 and me, that things happen. You go to the 2 doctor to try to get help with an issue. You 3 take the medication exactly as it was laid out 4 for you by your physician. And you assume that 5 when you're done with it, there's no side 6 effects. There's no -- there's no effect to 7 your -- your body, your ability to live the 8 rest of your life because you took that 9 medication. We assume that. 10 And I think what we're talking 11 about is those people finding themselves 12 trapped. They're addicted. They didn't -- 13 they didn't intend to go out and become 14 addicts. They didn't intend to go out and do 15 something illegal or -- or, you know, become 16 addicted to some drug, but it happens. 17 Q. So, Chief, I -- I understand. I 18 appreciate your view on those issues. I guess 19 my question is somewhat different. 20 A. Okay. 21 Q. Do you -- have you seen, for 22 example, any data from your department or 23 otherwise that would substantiate your view 24 that pills was a major cause of some of the 25 overdoses you're seeing?</p>

<p style="text-align: right;">Page 150</p> <p>1 A. I have not seen --</p> <p>2 MS. LEYIMU: Object to the form.</p> <p>3 A. I have not seen data that says</p> <p>4 it's -- it's because of the pills. But that's</p> <p>5 my personal belief.</p> <p>6 Q. That the -- your personal belief is</p> <p>7 the way you just described to us about how</p> <p>8 people might start using pills?</p> <p>9 A. My personal belief is that there is</p> <p>10 a section of our community that do illegal</p> <p>11 drugs. They participate in enjoining illegal</p> <p>12 drugs.</p> <p>13 But then there's a much larger</p> <p>14 percentage of the population that don't, but</p> <p>15 that -- that population that doesn't do illegal</p> <p>16 drugs and have no intention of doing illegal</p> <p>17 drugs can find themselves addicted against --</p> <p>18 you know, with -- without even that being their</p> <p>19 intention is what I mean.</p> <p>20 Q. I understand. And to put a fine</p> <p>21 point on it, the Akron Fire Department, for</p> <p>22 example, doesn't track or make available data</p> <p>23 that would show the number of people -- number</p> <p>24 of patients who took pills or started on pills</p> <p>25 or that type of information.</p>	<p style="text-align: right;">Page 152</p> <p>1 there was just a -- 2016 is when we really</p> <p>2 noticed that it was putting such a strain on</p> <p>3 our resources that we were running out of units</p> <p>4 to be available for any other type of calls.</p> <p>5 Over our PA system, when we get</p> <p>6 down to one med unit left in the city, the</p> <p>7 dispatcher will tell you, "We're down to one</p> <p>8 unit in the city." That's when we noticed, you</p> <p>9 know, the frequency of, you know, just how many</p> <p>10 times that that was the case for us.</p> <p>11 Q. And it's your view that the reason</p> <p>12 that the city was -- was stretched was because</p> <p>13 units were responding to more overdose</p> <p>14 incidents?</p> <p>15 A. I do.</p> <p>16 Q. And in this time period was it</p> <p>17 primarily heroin incidents to which paramedics</p> <p>18 were responding?</p> <p>19 A. Well --</p> <p>20 MS. LEYIMU: Object to the form of</p> <p>21 the question.</p> <p>22 A. -- that's just it. We don't make</p> <p>23 definitive evaluations to say this was heroin,</p> <p>24 this was oxycodone, this was fentanyl, in the</p> <p>25 field.</p>
<p style="text-align: right;">Page 151</p> <p>1 MS. LEYIMU: Object to the form.</p> <p>2 A. We have no data on that that I'm</p> <p>3 aware of.</p> <p>4 Q. Now, Chief, you referred to 2014 a</p> <p>5 few times now as -- as -- forgive me for</p> <p>6 paraphrasing, but when you started to notice a</p> <p>7 problem. Is that true?</p> <p>8 MS. LEYIMU: Object to the form.</p> <p>9 A. It was around 2014 when we started</p> <p>10 to notice an uptick in the number of overdose</p> <p>11 calls, yes.</p> <p>12 Q. And when we talk about overdose</p> <p>13 calls, are those instances where a paramedic or</p> <p>14 EMT administered Narcan?</p> <p>15 A. Yes.</p> <p>16 Q. And as we've discussed now a few</p> <p>17 times, in 2016 we had what you called a peak or</p> <p>18 a high -- a high wave, high tide of --</p> <p>19 A. Tsunami.</p> <p>20 Q. A tsunami?</p> <p>21 A. Yes. I think that's what I said.</p> <p>22 Q. Was there a specific point in 2016</p> <p>23 when that tsunami hit, as you've described it?</p> <p>24 A. I cannot pinpoint an exact month</p> <p>25 for you if that's what you're asking. But, no,</p>	<p style="text-align: right;">Page 153</p> <p>1 We get there; we evaluate a</p> <p>2 patient. They will have an altered level of</p> <p>3 consciousness, and if everything else checks</p> <p>4 out, and in that examination that lends us to</p> <p>5 suspect that there could be -- this could be an</p> <p>6 overdose person, then we administer Narcan.</p> <p>7 But we never say, oh, this was this</p> <p>8 particular drug or this one. That's something</p> <p>9 that the hospitals and the other medical</p> <p>10 community would have to -- to come up with</p> <p>11 that, those exact drugs, whether this person</p> <p>12 overdosed on.</p> <p>13 The only other instance would be if</p> <p>14 there's a bottle sitting right beside a person</p> <p>15 that you would have suspicion that maybe that's</p> <p>16 what it is. Again, that's a suspicion. That's</p> <p>17 not fact.</p> <p>18 Q. Or if a -- a patient was</p> <p>19 encountered with illegal paraphernalia, a</p> <p>20 needle or something of that nature, a paramedic</p> <p>21 might record that as well?</p> <p>22 A. That is correct. And then, again,</p> <p>23 it's a suspicion, not a fact of that's what</p> <p>24 happened. That's what we -- that's what we</p> <p>25 found on the scene, and that's what we suspect.</p>

<p style="text-align: right;">Page 154</p> <p>1 Q. And Akron Fire or EMS doesn't do 2 work after the fact to try to identify which 3 opiate caused a given overdose? 4 A. No. That is, we -- again, we're 5 emergency response, so when someone has an 6 emergency, we respond. We do the best we can 7 for that patient. We get them to the hospital 8 where they can get much better treatment. And 9 then our job -- our responsibility in that case 10 is then concluded. And actually, to get 11 further information could be considered a 12 violation of HIPAA. 13 Q. So to make sure I understand, a 14 paramedic or EMT arriving on scene will assess 15 the situation, and if there are symptoms 16 consistent with overdose -- opiate overdose 17 would administer Narcan? 18 A. Any overdose. 19 Q. When you say "any," what would be 20 the other types of overdoses that aren't opiate 21 related in which Narcan might be administered? 22 A. People might have an altered level 23 of consciousness from things such as bath 24 salts, and I'm sure there are many others out 25 there, or meth. You don't really know what</p>	<p style="text-align: right;">Page 156</p> <p>1 specific than that, but if we suspect that 2 Narcan may help, we administer it. 3 Q. And, Chief, when you refer to 2016 4 being this peak, when you noticed that 5 resources were stretched because units were 6 responding to opiate overdoses -- suspected 7 opiate overdoses, did I understand you 8 correctly that the definition of a -- of such a 9 call would be where Narcan is administered? 10 MS. LEYIMU: Object to the form of 11 the question. 12 A. I'm sorry. 13 Q. Let me -- I'll strike the question. 14 Besides bath salts or overdosing, 15 or using bath salts or meth, to your knowledge, 16 are there other substances that an individual 17 consumed that might present symptoms that are 18 the same as an individual overdosing on an 19 opiate? 20 A. There are many substances out 21 there, and I'm sure some of them present as, 22 you know, an overdose just like an opiate 23 would, I would imagine. Do I know them? No. 24 And again, our responsibility is to 25 get there, evaluate, and determine if they have</p>
<p style="text-align: right;">Page 155</p> <p>1 they've taken. 2 So the protocol is typically to 3 identify that they have an altered level of 4 consciousness, we suspect some type of an 5 overdose, and we administer Narcan. 6 Q. And there's no -- there's no side 7 effect to administering Narcan to a patient 8 who, in fact, wasn't having an opiate overdose; 9 is that right? 10 MS. LEYIMU: Object to the form. 11 A. I am not aware of what the side 12 effects are for administering Narcan. I'm 13 sure -- it seems like every drug has certain 14 side effects, but I don't know what the side 15 effects are for Narcan. 16 Q. Yeah. What we've -- what we've 17 been led to believe is that in most cases it's 18 best to be careful -- that's not the right 19 word, but to administer Narcan in cases where 20 you're not even sure if -- if there's an 21 altered consciousness, as you say. Is that 22 fair? 23 MS. LEYIMU: Object to the form of 24 the question. 25 A. The actual evaluation is more</p>	<p style="text-align: right;">Page 157</p> <p>1 an altered level of consciousness where we need 2 to try something invasive, and if we believed 3 that Narcan will help, we administer it. 4 Q. Earlier we -- we discussed -- 5 actually at the very beginning of our 6 deposition -- that EMTs are now authorized to 7 administer Narcan; is that right? 8 A. Yes. 9 Q. And that had not always been the 10 case? 11 A. That is correct. 12 Q. Have there been other changes in 13 the protocol governing the use of Narcan? 14 A. You know what? I'm not sure since 15 I have not been an active paramedic since the 16 mid-'90s. There have been many changes to our 17 protocol; I can tell you that. But I don't 18 know about how they would affect the 19 administration of Narcan. 20 MR. LANNIN: Do you want to take a 21 lunch break, or are you okay for a little 22 longer? 23 THE WITNESS: No. I'm thinking 24 that would be a -- this would be a good time. 25 MR. LANNIN: I saw you glancing at</p>

<p style="text-align: right;">Page 158</p> <p>1 your watch. I know the signs. 2 Let's take lunch. 3 THE WITNESS: Thank you. 4 THE VIDEOGRAPHER: Off the record, 5 12:15. 6 (A recess was taken.) 7 THE VIDEOGRAPHER: Back on the 8 record, 1:04. 9 MR. LANNIN: Chief, I'm going to 10 hand you what the court reporter will mark as 11 Defendants' Exhibit 4. 12 - - - - - 13 (Thereupon, Deposition Exhibit 4, 14 7/9/2012 E-Mail from Joseph Natko 15 Re: Surveillance of Drug Abuse 16 Trends, with Attachment, 17 AKRON_000266515 to 000266523, was 18 marked for purposes of 19 identification.) 20 - - - - - 21 BY MR. LANNIN: 22 Q. Take your time to read the document 23 and let me know when you're ready to proceed. 24 I'll represent to you, Chief, that 25 the cover page is the cover of the e-mail and</p>	<p style="text-align: right;">Page 160</p> <p>1 A. I do not. 2 Q. You see on the cover page it 3 appears to be an e-mail from Joe Natko dated 4 July 9, 2012 to a pdl_paramedics@akronohio.gov 5 e-mail address. 6 Do you see that? 7 A. Yes. 8 Q. Do you recognize that pdl_paramedics 9 e-mail address? 10 A. It looks like the standard format 11 for PDLs in the City of Akron, but I'm not 12 familiar with this particular one. 13 Q. What -- what is a PDL? 14 A. PDL means you're going to hit a 15 large scope of individuals. So if I send out a 16 document that says PDL fire, it will go to 17 everyone in the fire service. So not just the 18 fire department personnel, but also anyone 19 associated with the fire department. So our 20 secretaries, our fire maintenance facility, 21 et cetera, et cetera. 22 Q. Have you heard of a term 23 "LISTSERV"? 24 A. Say again. 25 Q. Have you heard of the term</p>
<p style="text-align: right;">Page 159</p> <p>1 the back half is the attachment to the e-mail. 2 And, Chief, excuse me for 3 interrupting. On the -- on the attachment, I 4 know it's several pages. I'm going to only ask 5 about a few passages. So you're welcome to 6 read as much as you like if I don't direct you 7 otherwise. 8 MS. COLEMAN: Hello. Is the court 9 reporter in the room? 10 MR. LANNIN: Yes. 11 MS. COLEMAN: This is Tera Coleman 12 of Baker Hostetler, and I'm going to be jumping 13 in now in place of Dan Lemon on behalf of the 14 Endo Defendants. 15 MR. LANNIN: Got it. Thanks, Tera. 16 MS. COLEMAN: Okay. Thank you. 17 So is that already on the record? 18 Do you need me to say it again once you guys 19 get started back up? 20 MR. LANNIN: It's on the record. 21 MS. COLEMAN: Thank you. 22 THE WITNESS: Okay. 23 BY MR. LANNIN: 24 Q. Chief, do you recognize Defendants' 25 Exhibit 4?</p>	<p style="text-align: right;">Page 161</p> <p>1 "LISTSERV"? 2 A. I have heard of it, but I couldn't 3 tell you what that is. 4 Q. At the time in 2012 -- strike that. 5 Did you say, sir, that you don't 6 recognize this particular PDL account? 7 A. Correct. 8 Q. In 2012, when -- when Joe Natko 9 sent this e-mail, any reason to think you were 10 or were not a member of that PDL account? 11 A. I was not. I was not a paramedic 12 at that time. 13 Q. If you look at the attachment. 14 A. Okay. 15 Q. Are you familiar with the Ohio 16 Substance Abuse Monitoring Network? 17 A. No. 18 Q. You've never heard of that 19 organization before? 20 A. No. 21 Q. Have you ever seen a document that 22 resembles this type of bulletin? 23 A. I've seen many bulletins, but not 24 one by this name, if that's what you're asking. 25 Q. Do you see, Chief, on the top left</p>

<p style="text-align: right;">Page 162</p> <p>1 of that document the date range June 2011 2 through January 2012? 3 A. Yes. 4 Q. And then let me direct your 5 attention to the rightmost box that reads 6 "Cleveland Region." 7 Do you see that? 8 A. Yes. 9 Q. Do you see the second bullet that 10 reads, "Heroin availability perceived to be at 11 'epidemic' levels." 12 A. I see it. 13 Q. Was it consistent with your 14 experience that heroin availability was at 15 epidemic levels in Cleveland in that timeframe 16 of June 2011 through early 2012? 17 MS. LEYIMU: Object to the form of 18 the question. 19 A. I am not aware of any heroin 20 availability or use considered epidemic in the 21 Cleveland area. I have very little contact, 22 first of all, with Cleveland. 23 Q. If you look -- when you say you're 24 not aware of heroin availability, are you -- 25 does that mean you don't know if it was at</p>	<p style="text-align: right;">Page 164</p> <p>1 Q. And that's because your -- at that 2 point in time you -- your job didn't require 3 you to know these types of statistics? 4 A. This -- 5 MS. LEYIMU: Object to the form. 6 You can answer. 7 A. This was not my area of 8 responsibility. 9 Q. Any reason to doubt that that's an 10 accurate statement? 11 MS. LEYIMU: Object to the form. 12 A. I'm not sure of where this document 13 came from. I don't know how they received 14 their data or gathered their data, so I could 15 not really, under oath, you know, swear to the 16 accurateness of this document. 17 Q. Chief, if you turn to page 3 of 18 that document. 19 A. Three, Okay. 20 Q. In the rightmost column, you see 21 the section that begins "Heroin"? 22 A. Yes. 23 Q. And the first sentence reads, 24 "Heroin remains highly available in all 25 regions"?</p>
<p style="text-align: right;">Page 163</p> <p>1 epidemic levels or not? 2 MS. LEYIMU: Object to the form. 3 Asked and answered. 4 A. That is correct. I don't recall -- 5 well, first of all, in this timeline I was 6 actually in charge of the hazardous materials 7 rescue bureau, and this would not have been 8 something that would have involved my area of 9 expertise, my area of responsibility. 10 Q. If you look at the next box down, 11 you see where it says -- reads "Akron-Canton 12 Region"? 13 A. Yes. 14 Q. And that first box reads -- or the 15 first bullet -- excuse me -- reads, "Increased 16 availability of heroin, powdered cocaine, 17 sedative-hypnotics and Suboxone." 18 Do you see that bullet? 19 A. Yes. 20 Q. The same question. In this time 21 frame, based on your experience, had there been 22 an increased availability of heroin in the 23 Akron region at that time? 24 MS. LEYIMU: Object to the form. 25 A. Not that I'm aware of.</p>	<p style="text-align: right;">Page 165</p> <p>1 Do you see that? 2 A. Yes. 3 Q. And a few sentences down, do you 4 see the sentence that reads, "The general 5 sentiment among participants was that heroin is 6 'falling out of the sky'"? 7 A. I see it. 8 Q. Have you ever heard anything to the 9 effect that heroin was falling out of the sky 10 in Akron around this time frame? 11 A. No. 12 Q. Have you heard anything to that 13 effect since? 14 A. First of all, to be factual, when 15 you start -- start talking about "falling out 16 of the sky," there are very few things that 17 truly fall out of the sky, so I assume that 18 they mean just very prevalent. 19 But I am not aware of any meetings 20 or discussions where an increase in heroin use 21 or availability was discussed. 22 Q. And is that the case in general? 23 By which I mean, you don't recall any meetings 24 you've had where an increased availability of 25 heroin was discussed?</p>

<p style="text-align: right;">Page 166</p> <p>1 MS. LEYIMU: Object to the form of</p> <p>2 the question.</p> <p>3 A. I cannot recall any such meeting.</p> <p>4 Q. You've never had discussions with</p> <p>5 colleagues about the availability of heroin in</p> <p>6 Akron?</p> <p>7 A. As a paramedic we talked about not</p> <p>8 just heroin but all types of trends that seem</p> <p>9 to be occurring, not just in our area but</p> <p>10 across the state and across the country.</p> <p>11 But specifically heroin? No.</p> <p>12 Q. So I just want to make sure I</p> <p>13 understand. You talk about all kinds of trends</p> <p>14 that seem to be occurring across the state and</p> <p>15 across the country and also in your area.</p> <p>16 A. Yes.</p> <p>17 Q. Does that encompass trends specific</p> <p>18 to heroin, or are they broader than that?</p> <p>19 MS. LEYIMU: Object to the form.</p> <p>20 Asked and answered.</p> <p>21 A. It was not specific to heroin.</p> <p>22 Again, about this time frame I was responsible</p> <p>23 for the hazmat rescue bureau, which on the</p> <p>24 organizational chart is actually special</p> <p>25 operations at this point in time, because we</p>	<p style="text-align: right;">Page 168</p> <p>1 (Thereupon, Deposition Exhibit 5,</p> <p>2 8/22/2016 E-Mail from Christine</p> <p>3 Curry Re: CBS Visit to Akron, Ohio,</p> <p>4 with Attached Document Titled "Media</p> <p>5 Advisory," AKRON_000243690 to</p> <p>6 000243705, was marked for purposes</p> <p>7 of identification.)</p> <p>8 - - - - -</p> <p>9 Q. Chief, this appears to be an e-mail</p> <p>10 with an attachment. The same story. I</p> <p>11 recognize that you're not on the cover e-mail.</p> <p>12 A. Yes.</p> <p>13 Q. My questions concern the</p> <p>14 attachment.</p> <p>15 A. Okay.</p> <p>16 Q. Chief, have you seen the attachment</p> <p>17 to Defendants' Exhibit 5 before?</p> <p>18 A. I do not remember seeing this</p> <p>19 attachment.</p> <p>20 Q. Do you recall a media advisory with</p> <p>21 the mayor on or around August 19, 2016?</p> <p>22 A. A media advisory? He's had many</p> <p>23 media advisories, so I couldn't be specific as</p> <p>24 to which one you're referring to, but go ahead.</p> <p>25 Q. The media advisory from this date</p>
<p style="text-align: right;">Page 167</p> <p>1 changed the name.</p> <p>2 But the focus at that time was more</p> <p>3 on other things that could hurt us that were in</p> <p>4 my -- my area of expertise, such as the</p> <p>5 precursors for making meth and things of that</p> <p>6 sort and how they could injure firefighters</p> <p>7 that were not suspecting that there were</p> <p>8 dangerous chemicals in that -- in that area,</p> <p>9 general area.</p> <p>10 So, no, we -- at that point, no,</p> <p>11 there was no discussion that I had with anyone</p> <p>12 about specific heroin availability or use.</p> <p>13 Q. And putting aside this specific</p> <p>14 time frame -- and forgive me for not being</p> <p>15 clear enough. At any point while you've been</p> <p>16 working at AFD, including after your promotion</p> <p>17 to chief, do you recall having any types of</p> <p>18 discussions with colleagues about increased</p> <p>19 availability of heroin in Akron?</p> <p>20 A. No. Not to my recollection.</p> <p>21 Q. You can put that aside, Chief.</p> <p>22 Thank you.</p> <p>23 MR. LANNIN: Chief, I'm handing you</p> <p>24 Defendants' Exhibit 5.</p> <p>25 - - - - -</p>	<p style="text-align: right;">Page 169</p> <p>1 appears to concern the stocking of police</p> <p>2 cruisers with naloxone.</p> <p>3 Do you see that?</p> <p>4 A. Okay. Yes.</p> <p>5 Q. And is it the case today that</p> <p>6 police cruisers are stocked with Narcan?</p> <p>7 A. Yes.</p> <p>8 Q. According to the quote here</p> <p>9 attributed to the mayor, "In many ways this</p> <p>10 epidemic has been creeping across the country</p> <p>11 and our region, specifically our county, for</p> <p>12 the past three to five years; however, no one</p> <p>13 could have predicted the introduction of</p> <p>14 fentanyl and carfentanil and the damage they've</p> <p>15 both caused."</p> <p>16 Do you see that?</p> <p>17 A. Yes.</p> <p>18 Q. What epidemic is that referencing?</p> <p>19 MS. LEYIMU: Object to the form.</p> <p>20 A. This is a quote from the mayor. I</p> <p>21 think you'd have to ask him to be sure.</p> <p>22 But I will say this. Being that it</p> <p>23 was dated in 2016, that is, again, the year</p> <p>24 that we had our peak with the opioid crisis.</p> <p>25 Q. Is it fair to surmise that the</p>

<p style="text-align: right;">Page 170</p> <p>1 epidemic he's referring to may be the opiate 2 epidemic? 3 A. I don't want to assume, and I don't 4 want to speak for the mayor, but I think it 5 would be better to ask the mayor specifically 6 what he meant. 7 Q. Do you share the mayor's sense that 8 the epidemic to which he's referring had been 9 creeping around the county for the past three 10 to five years -- 11 MS. LEYIMU: Object to the form -- 12 Q. -- prior to this date? 13 MS. LEYIMU: Object to the form of 14 the question. 15 A. I disagree because three to five 16 years of this being dated in 2016 will take you 17 back to -- as far back as 2011. 18 My recollection of the increase, 19 the uptick in the calls for overdoses -- opiate 20 overdoses was in around 2014. The timeline 21 doesn't seem to match. 22 Q. You think the mayor misspoke here? 23 MS. LEYIMU: Object to the form. 24 A. I think you'd have to ask him. 25 Q. Was someone providing him incorrect</p>	<p style="text-align: right;">Page 172</p> <p>1 A. Okay. Specifically? No. 2 Just to elaborate a little bit, 3 talking about approximately 2 1/2, 3 years ago, 4 we've had bad days, bad weeks. I couldn't tell 5 you what happened exactly at that time frame. 6 Q. You don't have even a general 7 recollection of an unusual number of overdoses 8 in and around that holiday weekend that year? 9 MS. LEYIMU: Object to the form. 10 A. I think 2016 was a bad year 11 overall. I think the -- the spike, the 12 increase, the sheer volume of overdose calls we 13 had in 2016 was just overwhelming. And if 14 you're referring to one particular weekend, 15 there may or may not have been a much larger 16 spike, but to me the entire year was a spike, 17 so. 18 Q. Let me just try one more factoid, 19 see if it helps jog your memory. 20 A. Okay. 21 Q. It may be that in and around that 22 weekend there was a number of overdoses 23 involving carfentanil. 24 A. Okay. 25 Q. Does that jog any memory of -- of a</p>
<p style="text-align: right;">Page 171</p> <p>1 information? 2 MS. LEYIMU: Object to the form of 3 the question. Calls for speculation. 4 A. I have no idea. 5 Q. Do you agree with his assessment 6 that "no one could have predicted the 7 introduction of fentanyl and carfentanil and 8 the damage they've both caused"? 9 A. I don't know if that's true. 10 Again, you'd have to ask the mayor what he 11 meant. But when you say no one could have 12 predicted, you're -- you're asking me to assume 13 what everyone is thinking. I have no idea. If 14 there were experts out there that knew this was 15 coming, I couldn't tell you. 16 Q. So if it was you, you wouldn't feel 17 comfortable with this language? 18 MS. LEYIMU: Object to the form. 19 A. I did not make this statement, and 20 I would not have been comfortable making this 21 statement. 22 Q. Chief, do you have any knowledge of 23 or recollection of a spate of overdoses that 24 occurred on or around the July 4th weekend of 25 2016?</p>	<p style="text-align: right;">Page 173</p> <p>1 number of overdoses that holiday weekend? 2 A. That particular weekend, no. But I 3 do remember a time when -- and it was in 4 2016 -- that there was a rash of overdoses 5 that -- it's -- it's as though the people that 6 were selling these drugs would come out with a 7 bad batch. A number of individuals would take 8 that -- that -- that drug and overdose and -- 9 and -- and die. 10 I can remember a few times, and I 11 can't be specific, when sometimes people in the 12 same household would be -- there would be a 13 couple of overdoses in the same room, so -- and 14 that was in -- specifically in 2016 that I can 15 remember some of those, and that was the first 16 I had heard of it. 17 Q. And you don't recall, sitting here 18 today, if that -- if the incidents which you're 19 referring involved, for example, carfentanil? 20 A. I could not tell you. I just know 21 they were overdoses. 22 Q. And these were substances -- these 23 were illegal drugs that individuals had bought 24 from -- from dealers? 25 MS. LEYIMU: Object to the form.</p>

<p style="text-align: right;">Page 174</p> <p>1 A. I don't know where they got the 2 drugs from. What I can tell you is there was a 3 large increase, and we had had waves where 4 people perished, where people died. Waves. 5 And then it would seem to die back 6 down for a while and then we'd have another one 7 hit where a number of people would -- would 8 perish, even to the point where I can remember 9 certain of our medics describing to -- to our 10 personnel that, "We went to that address in the 11 morning for an overdose. We were able to save 12 that person. They went to the hospital. They 13 went home, and then they over- -- overdosed 14 again later that same day." 15 So multiple times on the same day 16 to the same address with the same individual. 17 Q. So, Chief, when I showed you 18 Defendants' Exhibit 4, which concerned some 19 statistics from 2011 -- 20 A. Okay. 21 Q. -- you -- you testified to the 22 effect that at the time your job didn't require 23 you to be following those type of statistics. 24 Is that fair? 25 MS. LEYIMU: Object to the form.</p>	<p style="text-align: right;">Page 176</p> <p>1 our administrative building, and you would 2 hear, "We're down to one med unit in the city," 3 "We're out of med units in the city," 4 et cetera, et cetera. That -- that was 5 broadcast over our PA system for all the 6 administration to hear. 7 Q. And did you hear more of that type 8 of PA announcement, for example in 2014, when I 9 believe you said you first started recognizing 10 an uptick in overdose incidents? 11 A. We noticed an uptick, but it wasn't 12 anywhere near the volume of -- of times we were 13 running out of units as -- as what occurred in 14 2016. 15 And actually being the Chief of the 16 fire prevention bureau, I did what I could to 17 relieve people that I had when we needed to try 18 to put other units back in service. So there 19 were times when I would look at my captain and 20 say, "You know what? Jump in a car and go out 21 there and see what you can do." Or look and 22 see and say, "You know what? We've got" -- 23 "We've got a medic up here. Is there a spare 24 rig we could put you in," and put people in 25 service to try to cover some of those times</p>
<p style="text-align: right;">Page 175</p> <p>1 A. And that's Exhibit 4? Let's see 2 which one you're referring to here. 3 In 2011, yes. 4 Q. And up to December 1, 2016, you 5 were in the fire -- chief of the fire 6 prevention bureau; is that correct? 7 A. That is correct. 8 Q. So I'm -- I'm curious how you have 9 such detailed recollection of the 2016 epidemic 10 when for 11 months of that year, you, again, 11 were in a job that didn't require you to have 12 intimate involvement with -- with opioid 13 issues. 14 A. True. 15 MS. LEYIMU: Object to the form. 16 A. Okay. True. Although I was not 17 responsible for the area of EMS in 2016 -- and 18 actually I've never been responsible for EMS -- 19 there were discussions in some of our chief 20 meetings about the fact that we were running 21 out of med units and why. 22 As well as even though I was 23 isolated -- or not really isolated, but 24 separate from EMS when I was in fire 25 prevention, the PA system would go all around</p>	<p style="text-align: right;">Page 177</p> <p>1 when we had no units. 2 MR. LANNIN: This will be 3 Defendants' Exhibit 6. 4 - - - - - 5 (Thereupon, Deposition Exhibit 6, 6 3/19/2018 E-Mail from Charles Brown 7 Re: Opioid Overdoses, with 8 Attachment, AKRON_000236205 to 9 000236206, was marked for purposes 10 of identification.) 11 - - - - - 12 A. Okay. 13 Q. Chief, do you recognize Defense 14 Exhibit 6? 15 A. Vaguely. 16 Q. It appears to be an e-mail from 17 Deputy Mayor Brown to various individuals, 18 including yourself -- 19 A. Yes. 20 Q. -- dated March 19, 2018. Do you 21 see that? 22 A. Yes. 23 Q. Recognizing you may not have 24 recalled the specific e-mail, but any reason to 25 doubt that you received this?</p>

<p style="text-align: right;">Page 178</p> <p>1 A. I have no reason to doubt it.</p> <p>2 Q. And do you -- are you familiar with</p> <p>3 the High Intensity Drug Trafficking Area group?</p> <p>4 A. No.</p> <p>5 Q. That's not a name you had heard</p> <p>6 before or are familiar with?</p> <p>7 A. No.</p> <p>8 Q. If you turn to the attachment.</p> <p>9 A. Yes.</p> <p>10 Q. The headline for this document</p> <p>11 reads, "Possible explanation/causes for</p> <p>12 dramatic reduction in opiate overdoses in</p> <p>13 Akron-Summit County area during six-month</p> <p>14 period June 2017 to December 2017."</p> <p>15 Do you see that?</p> <p>16 A. Yes.</p> <p>17 Q. Is it correct that there was a</p> <p>18 dramatic reduction in opioid overdoses in that</p> <p>19 six-month period?</p> <p>20 MS. LEYIMU: Object to the form of</p> <p>21 the question.</p> <p>22 A. I cannot confirm.</p> <p>23 Q. You haven't heard one way or the</p> <p>24 other whether there was a reduction in that</p> <p>25 time period?</p>	<p style="text-align: right;">Page 180</p> <p>1 other than 2016.</p> <p>2 Q. Recognizing you don't have the</p> <p>3 numbers in front of you, but was 2018 better</p> <p>4 than 2017?</p> <p>5 MS. LEYIMU: Object to the form.</p> <p>6 A. I do not have those numbers.</p> <p>7 Q. No anecdotal sense?</p> <p>8 A. I do not. I just know that they</p> <p>9 were both bad.</p> <p>10 Q. But not as bad as 2016?</p> <p>11 MS. LEYIMU: Object to the form.</p> <p>12 A. My recollection is not as bad as</p> <p>13 2016, but still a significant increase over</p> <p>14 what I would consider normal.</p> <p>15 Q. What is normal?</p> <p>16 A. That's a very vague description.</p> <p>17 Very vague. And on purpose because nothing</p> <p>18 about what we do is really normal.</p> <p>19 Normally we have people that have</p> <p>20 emergencies, some of which are overdose</p> <p>21 victims, as well as everything else under the</p> <p>22 sun. Heart attacks, strokes, and everything</p> <p>23 else.</p> <p>24 What is normal is for those -- the</p> <p>25 number of those instances not to stress our</p>
<p style="text-align: right;">Page 179</p> <p>1 A. All I know is we've had, like, the</p> <p>2 tide. You know. We've -- we've had waves that</p> <p>3 come in and it's high, and then there are other</p> <p>4 times when it's low.</p> <p>5 Q. That actually goes to my next</p> <p>6 question. You know, to use the other</p> <p>7 terminology you used, the peak in 2016.</p> <p>8 A. Yes.</p> <p>9 Q. A substantial -- or I'm sorry --</p> <p>10 dramatic reduction in late 2017 would be</p> <p>11 consistent with the notion that -- that things</p> <p>12 had peaked in 2016. Is that fair?</p> <p>13 MS. LEYIMU: Object to the form of</p> <p>14 the question.</p> <p>15 Q. Can you repeat that for me, please?</p> <p>16 A. Yes.</p> <p>17 MR. LANNIN: Can you read it back?</p> <p>18 (Record read.)</p> <p>19 MS. LEYIMU: The same objection.</p> <p>20 A. I think things were so bad in 2016,</p> <p>21 that it truly, truly stressed all of our</p> <p>22 resources. And I don't -- without having the</p> <p>23 numbers in front of me, I don't believe that</p> <p>24 2017 was quite as bad, but still it -- it</p> <p>25 was -- it was worse than it had ever been,</p>	<p style="text-align: right;">Page 181</p> <p>1 capability to respond to the point where we're</p> <p>2 trying to really struggle or find ways to -- to</p> <p>3 maintain the level of service that -- that we</p> <p>4 need for our citizens. So it normally doesn't</p> <p>5 stress our ability to respond to incidents.</p> <p>6 This epidemic has truly stressed</p> <p>7 our ability to get out there and respond to</p> <p>8 incidents, and we have struggled to try to just</p> <p>9 meet the need that we have in our community.</p> <p>10 Q. Now, Chief, if you look at the</p> <p>11 fourth bullet down in that list --</p> <p>12 A. Okay.</p> <p>13 Q. -- the one beginning -- that reads,</p> <p>14 "Specific to the Akron area is the dramatic</p> <p>15 increase in the availability and use of</p> <p>16 methamphetamine. Summit County has the highest</p> <p>17 amount of 12 counties."</p> <p>18 Do you see that?</p> <p>19 A. I see it.</p> <p>20 Q. We touched on this earlier, but was</p> <p>21 it -- or is it consistent with your</p> <p>22 recollection that there had been a dramatic</p> <p>23 increase in the availability of meth in Akron</p> <p>24 in 2017?</p> <p>25 MS. LEYIMU: Object to the form of</p>

<p style="text-align: right;">Page 182</p> <p>1 the question.</p> <p>2 A. I cannot confirm that statement.</p> <p>3 Q. Any reason to doubt its accuracy?</p> <p>4 MS. LEYIMU: Object to the form.</p> <p>5 A. I don't know what they used --</p> <p>6 well, I'll put it this way. Just because</p> <p>7 something is on paper doesn't mean it's</p> <p>8 factual. This may or may not be true. I don't</p> <p>9 know.</p> <p>10 Q. You're not prepared to vouch for it</p> <p>11 either way?</p> <p>12 A. No.</p> <p>13 Q. Do you think Deputy Mayor Brown</p> <p>14 would have forwarded on a document that had</p> <p>15 inaccuracies in it?</p> <p>16 MS. LEYIMU: Object to the form of</p> <p>17 the question.</p> <p>18 A. I think Deputy Mayor Brown would</p> <p>19 forward any documentation he thought that might</p> <p>20 be able to help us. And since he is not</p> <p>21 someone who is an EMT, medic, first responder</p> <p>22 or professional that would always be able to</p> <p>23 verify the numbers or the ideas that you have</p> <p>24 here, anything that he thought that could help,</p> <p>25 he would be trying to share with us.</p>	<p style="text-align: right;">Page 184</p> <p>1 you.</p> <p>2 Chief, as we've explored with your</p> <p>3 colleagues, we understand the Akron Fire</p> <p>4 Department has a role in responding to incoming</p> <p>5 911 -- taking and responding to incoming 911</p> <p>6 calls?</p> <p>7 A. That is correct.</p> <p>8 Q. The department shares a -- a</p> <p>9 dispatch center with the police department?</p> <p>10 A. Yes.</p> <p>11 Q. Does the fire department track the</p> <p>12 number of incoming emergency calls?</p> <p>13 A. When you say "track," can you be</p> <p>14 more specific?</p> <p>15 Q. Sure. Just the -- the sheer</p> <p>16 number. The number of calls in a given year.</p> <p>17 A. Yes.</p> <p>18 Q. And does it track the number -- the</p> <p>19 same definition of track -- the number of calls</p> <p>20 coming in that are related to opioid incidents?</p> <p>21 A. We may or may not know that any</p> <p>22 incoming call is -- is in response to an opiate</p> <p>23 incident.</p> <p>24 When -- when a 911 call comes in,</p> <p>25 it could be anything from unresponsive to the</p>
<p style="text-align: right;">Page 183</p> <p>1 Furthermore, it says right here,</p> <p>2 "possible explanation." So even the people</p> <p>3 that put this document together aren't sure.</p> <p>4 Q. Chief, when was the last time</p> <p>5 things were normal, using your definition of</p> <p>6 the term, for Akron Fire Department?</p> <p>7 A. 2013. And again, that's a stretch</p> <p>8 because that's a very vague definition.</p> <p>9 Q. So whatever level of opiate-related</p> <p>10 incidents you had in 2013 would represent the</p> <p>11 baseline for normal?</p> <p>12 MS. LEYIMU: Object to the form of</p> <p>13 the question.</p> <p>14 A. I wouldn't put it that way.</p> <p>15 Putting it in my own words, I'd say that in</p> <p>16 2013 the amount of opiate overdose --</p> <p>17 overdoses did not strike us as highly unusual.</p> <p>18 There was no -- there was no great stress to</p> <p>19 our resources. And I would say that --</p> <p>20 That's it. I'm done with that</p> <p>21 statement. I don't see it as something that</p> <p>22 was stressing us.</p> <p>23 Any other questions on this</p> <p>24 document?</p> <p>25 Q. No. You can put that away. Thank</p>	<p style="text-align: right;">Page 185</p> <p>1 full gamut of possibilities. So you never know</p> <p>2 if something is truly an opiate call or not.</p> <p>3 Sometimes we never know.</p> <p>4 But what I -- what I believe is the</p> <p>5 number of opiate calls is higher than what</p> <p>6 we've been able to track. And I'll tell you</p> <p>7 why. When people are -- we find people</p> <p>8 deceased, you don't know if it was an opiate</p> <p>9 call or not. Some people will and some people</p> <p>10 won't tell us the truth as to what, you know,</p> <p>11 their true issue is. They know -- they know</p> <p>12 what they've done, but they may not want to</p> <p>13 tell us the truth as to what just occurred.</p> <p>14 And then, also, some people might</p> <p>15 have an altered level of consciousness where</p> <p>16 they can't tell you what occurred, but someone</p> <p>17 that's there in the room with them or if</p> <p>18 there's any bystander there, they may or may</p> <p>19 not be able to tell you or may or may not want</p> <p>20 to tell you what occurred.</p> <p>21 Q. Very good. So as I understand it,</p> <p>22 no one has ever said to you, "Chief, we had X</p> <p>23 number of opiate-related emergency calls."</p> <p>24 That's just not a statistic that's knowable.</p> <p>25 MS. LEYIMU: Object to the form of</p>

<p style="text-align: right;">Page 186</p> <p>1 the question. Mischaracterizes the witness's 2 testimony. 3 A. I'll describe it like this. When 4 you arrive on a call and you evaluate a person, 5 there is no bona fide way of knowing 100 6 percent if this was an opiate call or not. It 7 could be a different type of an overdose. They 8 could have some other medical issues going on. 9 One of the treatments available 10 that we have for people with an altered level 11 of consciousness is Narcan. So if we think 12 that Narcan may be able to help an individual, 13 then we administer it. It is not for us to 14 determine if it was an opiate pill overdose, 15 heroin. It's not for us to determine what 16 happened. We don't have that ability to sit 17 there and test to see exactly what someone just 18 overdosed on. Or for sure if that's 100 19 percent what the issue is. There could be 20 other medical issues going on. 21 Again, we are the first line of 22 defense. We -- we go out and we try to help 23 and save as many lives as we can, get those 24 people to the hospital and let a doctor take it 25 from there.</p>	<p style="text-align: right;">Page 188</p> <p>1 runs you had in a given period, do I understand 2 you right that you use whether Narcan was 3 dispensed as the indicator for an 4 opioid-related run? 5 A. No. 6 MS. LEYIMU: Object to the form of 7 the question. 8 Q. Can you -- can you correct my 9 misunderstanding? 10 A. The administration of Narcan is for 11 the typical unresponsive patient that we 12 suspect Narcan may be effective. We don't have 13 proof of that, so our numbers are not based on 14 how many times we administer Narcan. 15 When you talk about opiate drug 16 overdose, we rely on doctors and information 17 from the County to give us here's how many 18 overdoses you had that were based on, you know, 19 whatever. Again, we're not making that 20 determination. 21 Q. I appreciate that clarification. 22 Chief, this will be Defendants' 23 Exhibit 8 -- 7. 24 - - - - 25 (Thereupon, Deposition Exhibit 7,</p>
<p style="text-align: right;">Page 187</p> <p>1 Q. Understood. Chief, earlier when we 2 were talking about monthly dashboard reports, 3 do you remember that? 4 A. Yes. 5 Q. And I believe there was some 6 question of whether they were, in fact, 7 monthly. That wasn't always the case? 8 A. Yes. 9 Q. Is that fair? 10 A. That is fair. 11 Q. Do you have any estimate of -- of 12 how often they are generated? 13 A. I'm sorry. Say it again. 14 Q. Do you have an estimate of how 15 often they actually are generated? 16 A. There are times where we have 17 generated them monthly, and then other times 18 when we just had too much going on and we were 19 not -- unable to. So we try to do them 20 monthly, but that's not always the case. 21 Q. And -- and, Chief, I asked this 22 before, but I just want to make sure I 23 understood you right. 24 When your -- when your department 25 is attempting to report how many opioid-related</p>	<p style="text-align: right;">Page 189</p> <p>1 Akron Beacon Journal/Ohio.com 2 Article Titled, "Akron's New Fire 3 chief is Trusted by Colleagues and 4 Committed to Fighting Opioid 5 Epidemic", was marked for purposes 6 of identification.) 7 - - - - 8 THE WITNESS: Thank you. 9 MR. LANNIN: You know what, Chief? 10 Can I borrow this very quickly? I'm sorry. 11 THE WITNESS: Sure. 12 MR. LANNIN: Counsel, I wrote on 13 this copy by accident. This is my copy. 14 Q. Chief, take your time, but I'll 15 represent to you that this is an article that 16 we found on the Internet and printed. 17 A. Yes. 18 Q. Chief, have you seen Defense 19 Exhibit 7 before? 20 A. Yes. 21 Q. And what is it? 22 A. This is actually information after 23 my promotion to fire chief. 24 Q. Had you seen this specific article 25 from the Akron Beacon Journal before?</p>

<p style="text-align: right;">Page 190</p> <p>1 A. I have.</p> <p>2 Q. This -- we may have alluded to this</p> <p>3 earlier this morning. This was coincident with</p> <p>4 your promotion on December 1, 2016?</p> <p>5 A. Yes.</p> <p>6 Q. And -- and it was your birthday?</p> <p>7 A. Correct.</p> <p>8 Q. So nice birthday present.</p> <p>9 If you turn to the final paragraphs</p> <p>10 of that article, Chief, it quotes you as saying</p> <p>11 that "'The increase in the overdose deaths and</p> <p>12 calls is alarming'" -- I'll just read the</p> <p>13 paragraph -- "Tucker said of the City's most</p> <p>14 pressing issue for the department, 'We have to</p> <p>15 do something to help our people who are</p> <p>16 hurting. And the way I see it, if we don't</p> <p>17 address this issue, it's just going to continue</p> <p>18 to grow. We have to address it as a team</p> <p>19 effort with the hospitals, with public health,</p> <p>20 with the police department. And as a</p> <p>21 collaborative effort, we need to figure out the</p> <p>22 best way to help these people.'"</p> <p>23 Do you see that?</p> <p>24 A. Yes.</p> <p>25 Q. Is that an accurate quote?</p>	<p style="text-align: right;">Page 192</p> <p>1 A. Correct.</p> <p>2 Q. Any others come to mind?</p> <p>3 A. That is our major attempt to try to</p> <p>4 decrease the level of repeat overdoses.</p> <p>5 And we have evaluated as to whether</p> <p>6 or not we need to put a second unit in service</p> <p>7 and whether or not we have the manpower to do</p> <p>8 it.</p> <p>9 Q. When you refer to a second unit,</p> <p>10 what does that mean?</p> <p>11 A. Say again.</p> <p>12 Q. What do you mean by second unit?</p> <p>13 A. Right now there is one QRT unit.</p> <p>14 Whether or not we need to add additional QRT</p> <p>15 or -- or ARV units.</p> <p>16 Q. So at the moment the department is</p> <p>17 considering a second Quick Response Team?</p> <p>18 A. We are looking at if that would</p> <p>19 help. If they're able to actually -- excuse</p> <p>20 me -- if one is effective enough, is one all</p> <p>21 that we need right now? Is one all that we can</p> <p>22 afford right now? Because all of these ideas</p> <p>23 take money and manpower, and trying to evaluate</p> <p>24 the effectiveness of this system.</p> <p>25 MR. LANNIN: Can we go off for a</p>
<p style="text-align: right;">Page 191</p> <p>1 A. Yes.</p> <p>2 Q. Two years -- almost more than two</p> <p>3 years on at this point, do you continue to</p> <p>4 agree with what you said on that day?</p> <p>5 A. I do.</p> <p>6 Q. So you mentioned addressing the</p> <p>7 issue, obviously. This morning we talked about</p> <p>8 three -- strike that.</p> <p>9 In -- in what ways has the</p> <p>10 department addressed the opioid crisis since</p> <p>11 this point?</p> <p>12 A. A couple things. We have</p> <p>13 instigated our -- both the ARV as well as the</p> <p>14 QRT programs, which put additional -- the ARV</p> <p>15 put an additional unit out there during peak</p> <p>16 times. The Quick Response Team, or QRT, is</p> <p>17 actually a collaborative effort, like we said</p> <p>18 before, with mental health as -- as well as the</p> <p>19 police department to go and try to get people</p> <p>20 who have previously overdosed to agree to enter</p> <p>21 a treatment program.</p> <p>22 Q. So the quote refers to team effort,</p> <p>23 collaborative efforts. QRT, as I understand</p> <p>24 it, is one example of that type of</p> <p>25 collaborative effort?</p>	<p style="text-align: right;">Page 193</p> <p>1 minute?</p> <p>2 THE VIDEOGRAPHER: Off the record,</p> <p>3 1:51.</p> <p>4 (A recess was taken.)</p> <p>5 - - - - -</p> <p>6 (Thereupon, Deposition Exhibit 8,</p> <p>7 10/10/2017 E-Mail from Joseph Natko</p> <p>8 Re: Opiate Talking Points,</p> <p>9 AKRON_000233944 to 000233945, was</p> <p>10 marked for purposes of</p> <p>11 identification.)</p> <p>12 - - - - -</p> <p>13 THE VIDEOGRAPHER: We're back on</p> <p>14 the record, 2:13.</p> <p>15 BY MR LANNIN:</p> <p>16 Q. Chief, earlier this morning we</p> <p>17 discussed the training that you received in</p> <p>18 responding to opiate -- opioid overdoses.</p> <p>19 Do you remember that testimony?</p> <p>20 A. Vaguely. Okay.</p> <p>21 Q. I believe you testified that as</p> <p>22 part of paramedic training one learns to</p> <p>23 observe the signs of a potential overdose and</p> <p>24 how to dispense Narcan.</p> <p>25 A. Yes.</p>

<p style="text-align: right;">Page 194</p> <p>1 Q. Is that generally fair?</p> <p>2 A. That is fair.</p> <p>3 Q. And I assume paramedics at Akron</p> <p>4 Fire Department today receive the same training</p> <p>5 as part of their basic paramedic training?</p> <p>6 MS. LEYIMU: Object to the form.</p> <p>7 A. They receive training, but I'm</p> <p>8 sure, you know, from 1989 to now it's</p> <p>9 different. It's evolved.</p> <p>10 Q. Understood. But the -- the core</p> <p>11 concept of recognizing an overdose, dispensing</p> <p>12 Narcan, those -- those won't have changed.</p> <p>13 A. Correct.</p> <p>14 Q. Does the Akron Fire Department</p> <p>15 offer any training for its employees that --</p> <p>16 over and above basic paramedic training, that</p> <p>17 is specific to opioid-related incidents?</p> <p>18 MS. LEYIMU: Object to the form of</p> <p>19 the question.</p> <p>20 A. I'm just trying to get</p> <p>21 clarification. Are you referring to our</p> <p>22 paramedics, then, or other individuals?</p> <p>23 Q. Any -- any class of employees.</p> <p>24 A. Our EMS bureau, along with the</p> <p>25 medical director, determine what classes they</p>	<p style="text-align: right;">Page 196</p> <p>1 put on by the International Association of</p> <p>2 Firefighters.</p> <p>3 So they're -- they're -- the gamut</p> <p>4 is very large as to how different trainings are</p> <p>5 paid for. Just depends on the specific</p> <p>6 training.</p> <p>7 Q. Is there someone in your department</p> <p>8 who would be the best person to ask about which</p> <p>9 entity was paying for a specific training?</p> <p>10 A. As it -- as it re- -- in regards to</p> <p>11 EMS, I would assume?</p> <p>12 Q. Yes.</p> <p>13 A. That would be District Chief Joe</p> <p>14 Natko.</p> <p>15 Q. You'd expect Joe Natko has records</p> <p>16 about that type of thing?</p> <p>17 MS. LEYIMU: Object to the form.</p> <p>18 A. I'm not sure what kind of records</p> <p>19 he would have for that.</p> <p>20 Q. Are you aware of any training that</p> <p>21 the Akron Fire Department provides related to</p> <p>22 opioid incidents for employees of other City</p> <p>23 departments?</p> <p>24 A. I really don't have any knowledge</p> <p>25 of training for other City employees.</p>
<p style="text-align: right;">Page 195</p> <p>1 think our medics would need for continuing</p> <p>2 education. And I don't know if it's -- if</p> <p>3 that -- if the opiate training has been</p> <p>4 something additional that they have given to</p> <p>5 our medics or not.</p> <p>6 Q. So there's training that happens,</p> <p>7 but sitting here today, you can't be sure one</p> <p>8 way or the other whether there's been special</p> <p>9 opioid-related training.</p> <p>10 A. That is correct.</p> <p>11 Q. To the extent there's trainings at</p> <p>12 all, those are paid for by the Akron Fire</p> <p>13 Department?</p> <p>14 MS. LEYIMU: Object to the form.</p> <p>15 A. You're asking if -- if the</p> <p>16 trainings are paid for AFD?</p> <p>17 Q. Correct.</p> <p>18 A. Some are; some are not.</p> <p>19 Q. And those that aren't, how are</p> <p>20 those paid for?</p> <p>21 A. There's a wide variety of ways that</p> <p>22 training is paid for. And when I say "a wide</p> <p>23 variety," truly it is.</p> <p>24 Some trainings are, you know, put</p> <p>25 on by Summit County. Other trainings might be</p>	<p style="text-align: right;">Page 197</p> <p>1 Q. Would Chief Natko be the right</p> <p>2 person to ask that question?</p> <p>3 A. That is correct. Refer to Chief</p> <p>4 Natko.</p> <p>5 MR. LANNIN: Chief, this is</p> <p>6 Defendants' Exhibit 8.</p> <p>7 A. Okay.</p> <p>8 Q. Chief, do you recognize Defendants'</p> <p>9 Exhibit 8?</p> <p>10 A. I do not recognize it, but I -- I</p> <p>11 don't doubt that it was sent. My name is on it</p> <p>12 as being cc'd on this e-mail.</p> <p>13 Q. To your point, it appears to be an</p> <p>14 e-mail from Chief Natko to various individuals</p> <p>15 in which you're cc'd, dated October 10, 2017.</p> <p>16 So, Chief, I want to talk about the</p> <p>17 bullet points that Chief Natko lists near the</p> <p>18 end of his e-mail under the heading "Efforts</p> <p>19 Akron has taken to combat the opiate epidemic."</p> <p>20 Do you see that?</p> <p>21 A. Okay. Yes.</p> <p>22 Q. Now, you'll have to forgive me,</p> <p>23 because I want to take them out of order, but</p> <p>24 if you look at the third one down, it refers to</p> <p>25 "Narcan addition to all safety forces</p>

<p style="text-align: right;">Page 198</p> <p>1 vehicles."</p> <p>2 Do you see that?</p> <p>3 A. Yes.</p> <p>4 Q. And, of course, we've talked about</p> <p>5 Narcan quite a bit today. Do you understand</p> <p>6 what he's referring to when he -- he mentions</p> <p>7 all safety force vehicles?</p> <p>8 A. At some point in 2016, we added</p> <p>9 Narcan to police department vehicles, as well</p> <p>10 as fire engines. I believe that's what he is</p> <p>11 referring to. But to be 100 percent sure,</p> <p>12 you'd have to ask Chief Natko.</p> <p>13 Q. And the bullet above that reads,</p> <p>14 "Protocol revisions upping the Narcan."</p> <p>15 Do you see that?</p> <p>16 A. Yes.</p> <p>17 Q. What does that refer to?</p> <p>18 A. I have no idea.</p> <p>19 Q. You're not familiar with any</p> <p>20 revisions at this point in time regarding the</p> <p>21 dosage of Narcan?</p> <p>22 A. I, again, am not serving currently</p> <p>23 as an active paramedic for the City of Akron,</p> <p>24 and the actual management of protocols is</p> <p>25 something that he works out with our medical</p>	<p style="text-align: right;">Page 200</p> <p>1 Chief Kaut.</p> <p>2 Q. Remind me, District Chief Kaut,</p> <p>3 his -- his role?</p> <p>4 A. He is actually our accountant.</p> <p>5 Q. Keeps the books?</p> <p>6 A. Yes.</p> <p>7 Q. The third bullet from the top</p> <p>8 reads, "QRT program Thursday deployments."</p> <p>9 That refers to the Quick Response Team that</p> <p>10 we've been discussing?</p> <p>11 A. The third bullet, you said?</p> <p>12 Q. The third bullet from the top --</p> <p>13 from the bottom. Excuse me.</p> <p>14 A. Oh, okay.</p> <p>15 Yes.</p> <p>16 Q. Is it still the case that the QR</p> <p>17 team -- T -- the Quick Response Team deploys on</p> <p>18 Thursdays only?</p> <p>19 A. The last I heard, it was only on</p> <p>20 Thursdays, correct.</p> <p>21 Q. What costs, if any, does the fire</p> <p>22 department incur in relation to the Quick</p> <p>23 Response Team?</p> <p>24 MS. LEYIMU: Object to the form of</p> <p>25 the question.</p>
<p style="text-align: right;">Page 199</p> <p>1 advisor. Our medical director, rather.</p> <p>2 Q. And I think you told me earlier, to</p> <p>3 the extent there was a protocol change, that</p> <p>4 wouldn't land on your desk for approval?</p> <p>5 A. It would not.</p> <p>6 Q. Chief, who pays for the Narcan that</p> <p>7 the Akron Fire Department dispenses?</p> <p>8 A. I think initially we purchase it,</p> <p>9 and then it -- as it is used, it is exchanged</p> <p>10 at the hospital, if we're talking about EMS</p> <p>11 units. If you're talking about other apparatus</p> <p>12 around the city, I'm not sure.</p> <p>13 Q. Is it the same with Akron Fire</p> <p>14 trucks, insofar as the City purchases the</p> <p>15 initial batch and then exchanges one for one?</p> <p>16 A. Correct.</p> <p>17 Q. For other safety vehicles, you're</p> <p>18 not sure?</p> <p>19 A. That is correct.</p> <p>20 Q. Do you know how often after the</p> <p>21 initial purchase the City -- or I'm sorry --</p> <p>22 Akron Fire Department needs to purchase more</p> <p>23 Narcan, if at all?</p> <p>24 A. I am not aware of that. That would</p> <p>25 be between District Chief Natko and District</p>	<p style="text-align: right;">Page 201</p> <p>1 A. The salary for the personnel on the</p> <p>2 unit; the vehicle that is used to go out to</p> <p>3 deploy this -- this -- this unit; gas and</p> <p>4 maintenance of the vehicle. And I'm sure there</p> <p>5 are others, but I can't think of them at this</p> <p>6 moment.</p> <p>7 Q. Sitting here today, do you have</p> <p>8 a -- do you know how much it costs the fire</p> <p>9 department to pay for the QRT or contribute to</p> <p>10 the QRT?</p> <p>11 A. No.</p> <p>12 Q. And District Chief Kaut?</p> <p>13 A. Correct.</p> <p>14 Q. And forgive me. You might have</p> <p>15 said this earlier, Chief, that the personnel</p> <p>16 you referred to from the fire department that</p> <p>17 participate on the QRT, are those fire medics?</p> <p>18 A. They are paramedics.</p> <p>19 Q. The first bullet in that list on</p> <p>20 Defendants' Exhibit 8 refers to "Member of the</p> <p>21 Summit County Opiate Task Force, a group that</p> <p>22 shares best practices?"</p> <p>23 Do you see that?</p> <p>24 A. Yes.</p> <p>25 Q. Are you familiar with the Summit</p>

<p style="text-align: right;">Page 202</p> <p>1 County Opiate Task Force?</p> <p>2 A. I -- I know of it, but I don't</p> <p>3 participate on it.</p> <p>4 Q. And what do you know about it?</p> <p>5 A. I have District Chief Natko</p> <p>6 assigned to it, and if there's anything of that</p> <p>7 group that he needs to come back and share with</p> <p>8 me, he will.</p> <p>9 Q. Do you recall instances where --</p> <p>10 where he has done that?</p> <p>11 A. Yes.</p> <p>12 Q. Does the Akron Fire Department</p> <p>13 incur any costs in connection with its</p> <p>14 participation in the Summit County Opiate Task</p> <p>15 Force?</p> <p>16 MS. LEYIMU: Object to the form of</p> <p>17 the question.</p> <p>18 A. There is a cost for an employee to</p> <p>19 be taken off their other assignments to go and</p> <p>20 participate on this task force, fuel and a</p> <p>21 vehicle to get them to and from the meetings,</p> <p>22 and probably others, but I'm not aware of them.</p> <p>23 Q. To your knowledge, is there any</p> <p>24 type of fee, for example, that the fire</p> <p>25 department pays to be a member of this task</p>	<p style="text-align: right;">Page 204</p> <p>1 we suspect that there is an overdose issue,</p> <p>2 drug, list out options.</p> <p>3 Q. Who pays for that educational</p> <p>4 material?</p> <p>5 A. I'm not sure.</p> <p>6 Q. Best person to ask, District Chief</p> <p>7 Kaut?</p> <p>8 A. Correct.</p> <p>9 Q. Next bullet down, "Narcotic</p> <p>10 disposal bags for distribution on all med</p> <p>11 units." Do you see that?</p> <p>12 A. Yes.</p> <p>13 Q. Do you know what that refers to?</p> <p>14 A. I was aware of this, if that's what</p> <p>15 you mean. So I was aware we were doing it, but</p> <p>16 that's it.</p> <p>17 Q. Do you know what it is?</p> <p>18 A. Yes. Bags to properly dispose</p> <p>19 different drugs if, you know, the person at</p> <p>20 that -- on that call would -- would like to get</p> <p>21 rid of drugs. Not just illicit drugs, but any</p> <p>22 drugs.</p> <p>23 Q. So for disposal, for example, of</p> <p>24 unwanted prescription drugs or illegal drugs?</p> <p>25 A. This may be something different,</p>
<p style="text-align: right;">Page 203</p> <p>1 force?</p> <p>2 A. Not that I'm aware of.</p> <p>3 Q. In your tenure, has it always been</p> <p>4 Chief Natko who's represented the fire</p> <p>5 department on this task force?</p> <p>6 A. Are you referring to my tenure as</p> <p>7 fire chief or my tenure on the fire department?</p> <p>8 Q. I guess I mean since you've been</p> <p>9 chief, yes.</p> <p>10 A. Yes, it has been Chief Natko.</p> <p>11 Q. Besides this Summit County Opiate</p> <p>12 Task Force, are there any other task force or</p> <p>13 working groups of that nature that the fire</p> <p>14 department participates in that are related to</p> <p>15 opiate incidents?</p> <p>16 MS. LEYIMU: Object to the form.</p> <p>17 A. Not that I'm aware of.</p> <p>18 Q. The fourth bullet, Chief, reads,</p> <p>19 "Referral educational materials for</p> <p>20 distribution on all med units."</p> <p>21 Do you see that?</p> <p>22 A. Yes.</p> <p>23 Q. Do you know what that refers to?</p> <p>24 A. Yes. I think it is printed</p> <p>25 material that is given out on EMS calls where</p>	<p style="text-align: right;">Page 205</p> <p>1 though, because it refers to narcotic disposal</p> <p>2 bags, so I'm not sure. We'd have to defer to</p> <p>3 Natko.</p> <p>4 Q. Understood.</p> <p>5 But there is something that you're</p> <p>6 familiar with, some type of program, that --</p> <p>7 that provides bags to dispose of unwanted</p> <p>8 prescription or illicit --</p> <p>9 A. Yes.</p> <p>10 Q. -- drugs?</p> <p>11 Do you know who pays for that</p> <p>12 program?</p> <p>13 A. No.</p> <p>14 Q. District Chief Kaut?</p> <p>15 A. Ask Kaut/Natko.</p> <p>16 Q. Chief, besides the items that</p> <p>17 we've -- the programs or projects that we've</p> <p>18 talked about today, including the items listed</p> <p>19 here, any other initiatives or programs that</p> <p>20 you can think of that the fire department has</p> <p>21 implemented specifically in response to the</p> <p>22 opioid -- what you've called an opioid epidemic</p> <p>23 or crisis?</p> <p>24 A. Programs? No.</p> <p>25 Q. We've covered them all?</p>

<p style="text-align: right;">Page 206</p> <p>1 A. I believe so.</p> <p>2 Q. Chief, you said earlier, I believe,</p> <p>3 that your call-takers or your paramedics</p> <p>4 arriving on a scene don't have the ability to</p> <p>5 know what substance caused a given overdose.</p> <p>6 Is that fair?</p> <p>7 MS. LEYIMU: Object to the form of</p> <p>8 the question.</p> <p>9 A. We don't know 100 percent, but</p> <p>10 sometimes there are hints. So if there are</p> <p>11 drugs still lying around that we can identify,</p> <p>12 then we identify them. But, again, that's what</p> <p>13 we suspect. It's not concrete.</p> <p>14 Q. And as I think follows from that, I</p> <p>15 gather your call-takers, your paramedics, don't</p> <p>16 know for sure, except in those types of</p> <p>17 instances, which specific opiate caused an</p> <p>18 overdose, if in fact it was an opiate?</p> <p>19 A. That is correct.</p> <p>20 Q. All right, Chief. Everyone's</p> <p>21 favorite topic, the budget. I'll try to go</p> <p>22 quick.</p> <p>23 A. Okay.</p> <p>24 Q. How is the fire department's budget</p> <p>25 created?</p>	<p style="text-align: right;">Page 208</p> <p>1 Kaut's level.</p> <p>2 Q. He does the numbers?</p> <p>3 A. Yes.</p> <p>4 Q. Do you need to approve the budget</p> <p>5 before it's submitted?</p> <p>6 A. Yes.</p> <p>7 Q. Once a budget has been formulated</p> <p>8 and you've approved it, does it go to another</p> <p>9 body for debate or implementation or approval?</p> <p>10 A. Yes.</p> <p>11 Q. What body?</p> <p>12 A. Again, Diane Miller-Dawson and</p> <p>13 Steve Fricker.</p> <p>14 Q. So the finance department has a</p> <p>15 role in approving the budget once it gets out</p> <p>16 of your department?</p> <p>17 A. Yes.</p> <p>18 Q. Who has ultimate authority for</p> <p>19 approving the budget; do you know?</p> <p>20 A. Yes. Those two: Diane</p> <p>21 Miller-Dawson and Steve Fricker.</p> <p>22 Q. So the city council, for example,</p> <p>23 doesn't vote on -- on that?</p> <p>24 A. They do vote on it, but -- well, so</p> <p>25 as a correction, I guess, city council does</p>
<p style="text-align: right;">Page 207</p> <p>1 A. Collaboration between District</p> <p>2 Chief Kaut and Diane Miller-Dawson, as well as</p> <p>3 Steve Fricker for the City.</p> <p>4 Q. Ms. Miller-Dawson and Mr. Fricker</p> <p>5 work in finance?</p> <p>6 A. That is correct.</p> <p>7 Q. How would you characterize your</p> <p>8 role, if any, in developing or improving</p> <p>9 this -- the fire department budget?</p> <p>10 A. Just like in everything that I am</p> <p>11 responsible for, I'm responsible for setting</p> <p>12 the tone of what we're doing and directing my</p> <p>13 deputy- and district-chief-level supervisors as</p> <p>14 to how I want specific situations handled.</p> <p>15 Q. So would that mean, for example,</p> <p>16 giving guidance to your subordinates about</p> <p>17 priorities or projects that you think need</p> <p>18 funding?</p> <p>19 A. That is correct.</p> <p>20 Q. Do you get down into the weeds in</p> <p>21 terms of proposing actual hard numbers --</p> <p>22 A. No.</p> <p>23 Q. -- or is it at a higher level?</p> <p>24 A. That's -- that's -- that's at</p> <p>25 Lieutenant Steve -- excuse me, District Chief</p>	<p style="text-align: right;">Page 209</p> <p>1 have to approve the final budget for the entire</p> <p>2 city.</p> <p>3 Q. Is it an annual budget for the fire</p> <p>4 department?</p> <p>5 A. Yes.</p> <p>6 Q. Is it your favorite part of the</p> <p>7 job?</p> <p>8 Strike the question. I won't make</p> <p>9 you answer that on the record.</p> <p>10 MR. LANNIN: This is Defendants'</p> <p>11 Exhibit 9.</p> <p>12 - - - - -</p> <p>13 (Thereupon, Deposition Exhibit 9,</p> <p>14 1/17/2017 E-Mail from Amanda Groeger</p> <p>15 Re: 2016 Budget Comment Bulleted,</p> <p>16 with Attachment, AKRON_000230168 to</p> <p>17 000230169, was marked for purposes</p> <p>18 of identification.)</p> <p>19 - - - - -</p> <p>20 A. Yes.</p> <p>21 Q. Chief, do you recognize Defendants'</p> <p>22 9?</p> <p>23 A. Yes.</p> <p>24 Q. What is it?</p> <p>25 A. It was a -- like a cheat sheet</p>

<p style="text-align: right;">Page 210</p> <p>1 developed for me by my secretary at that time</p> <p>2 as I was about to go and speak to city council</p> <p>3 about our budget.</p> <p>4 Q. And do you recall attending the</p> <p>5 city council to deliver these talking points?</p> <p>6 A. This particular one, yes.</p> <p>7 Q. Have you done it every year since</p> <p>8 you've been chief?</p> <p>9 A. No.</p> <p>10 Q. This was shortly after you were</p> <p>11 promoted; is that right?</p> <p>12 A. Correct.</p> <p>13 Q. Who is Amanda Groeger?</p> <p>14 A. She used to be my secretary.</p> <p>15 Q. And she's left the department?</p> <p>16 A. No. She's in another position in</p> <p>17 the fire department now.</p> <p>18 Q. What's her role now?</p> <p>19 A. She is a secretary out at our</p> <p>20 training academy. Excuse me. Administrative</p> <p>21 assistant. They're not called secretaries any</p> <p>22 longer.</p> <p>23 Q. Very good.</p> <p>24 A. Uh-huh.</p> <p>25 Q. Chief, under the bullets for 2016</p>	<p style="text-align: right;">Page 212</p> <p>1 A. Yes.</p> <p>2 Q. Do you know what that is?</p> <p>3 A. SAFER Grant is a grant that you can</p> <p>4 apply for on an annual basis that helps you</p> <p>5 boost your number of firefighters to what we</p> <p>6 would consider an adequate level.</p> <p>7 Q. Is it federal funds?</p> <p>8 A. It is federal funds, and there is a</p> <p>9 matching percentage for both of these grants.</p> <p>10 Q. What do you mean when you refer to</p> <p>11 a "matching percentage"?</p> <p>12 A. It might be 80/20, where they</p> <p>13 provide 80 percent of the money; you provide 20</p> <p>14 percent.</p> <p>15 Q. I understand.</p> <p>16 The -- the fire department</p> <p>17 itself -- the City itself provides part of the</p> <p>18 grant?</p> <p>19 A. Correct.</p> <p>20 Q. So am I correct that in 2016, at</p> <p>21 least, the -- the AFD had been awarded funds</p> <p>22 from a SAFER Grant?</p> <p>23 A. Yes.</p> <p>24 Q. Do you know if the City received a</p> <p>25 SAFER Grant in 2017?</p>
<p style="text-align: right;">Page 211</p> <p>1 on that document, do you see the third one down</p> <p>2 that reads "AFG Grants/SCBAs and thumpers"?</p> <p>3 A. Yes.</p> <p>4 Q. Can you translate what that means?</p> <p>5 A. It was, again, just something to</p> <p>6 cue my thought process for the -- the</p> <p>7 Assistance to Firefighters Grant, the purchase</p> <p>8 of new SCBAs, or self-contained breathing</p> <p>9 apparatus, that firefighters wear into a fire.</p> <p>10 And what we call thumpers are machines that do</p> <p>11 CPR, the -- the actual pumping action of CPR on</p> <p>12 people so that you can free up the medics or</p> <p>13 EMTs to do something else while the machine</p> <p>14 takes that one particular function over.</p> <p>15 Q. Who provides the AFG Grant?</p> <p>16 A. Who provide -- you mean where is it</p> <p>17 coming from?</p> <p>18 Q. Exactly.</p> <p>19 A. Assistance to Firefighters Grant?</p> <p>20 It is through FEMA and the National Fire</p> <p>21 Academy.</p> <p>22 Q. It's federal money?</p> <p>23 A. That is correct.</p> <p>24 Q. How about the next bullet down,</p> <p>25 refers to a SAFER Grant.</p>	<p style="text-align: right;">Page 213</p> <p>1 A. I believe we did not, and I believe</p> <p>2 our 2016 grant ran out at the beginning of this</p> <p>3 year. It only runs for two years.</p> <p>4 Q. And the SAFER Grant pays</p> <p>5 exclusively for hiring new fire medics; is that</p> <p>6 right?</p> <p>7 A. That is correct.</p> <p>8 Q. Who in your department would know</p> <p>9 the most about the details of some of these</p> <p>10 grants?</p> <p>11 A. District Chief Steve Kaut.</p> <p>12 Q. Still District Chief Kaut.</p> <p>13 Besides the AFG and the SAFER</p> <p>14 Grants, are there any that come to mind that</p> <p>15 you're aware of the AFD receiving?</p> <p>16 A. Actually, we've applied for and</p> <p>17 received numerous other grants. And I could</p> <p>18 not tell you the scope of all of them, but</p> <p>19 numerous grants. Some were small and some were</p> <p>20 large.</p> <p>21 Q. Is it mostly several -- excuse</p> <p>22 me -- mostly federal, mostly state, or a mix</p> <p>23 of -- of different types?</p> <p>24 A. A mix of different types.</p> <p>25 Q. Do you know of any grants that the</p>

<p style="text-align: right;">Page 214</p> <p>1 AFD has either applied for or received that 2 relate exclusively to opioid-related incidents 3 or costs? 4 MS. LEYIMU: Object to the form of 5 the question. 6 A. I do not. 7 Q. Sorry. You don't -- there are 8 none, or you don't know one way or the other? 9 A. I don't know of any. 10 Q. The next bullet down, do you see 11 where it reads EPCR? 12 A. Yes. 13 Q. Do you know what that stands for? 14 A. Honestly, I don't remember. 15 Q. You can put that away, Chief. 16 Thank you. 17 MR. LANNIN: Chief, this would be 18 Defendants' Exhibit 10. 19 - - - - - 20 (Thereupon, Deposition Exhibit 10, 21 2017 Budget Plan, City of Akron, 22 Ohio AKRON_000003228 to 000003558, 23 was marked for purposes of 24 identification.) 25 - - - - -</p>	<p style="text-align: right;">Page 216</p> <p>1 would you describe the sources of funding for 2 the fire department? 3 A. Say again. 4 Q. At a general level, what are the 5 major sources of funding for the fire 6 department? 7 A. There are multiple, and to know 8 each -- each of those, I would defer to 9 District Chief Kaut. 10 Q. And do you know at -- at a very 11 high level just the different types of funding 12 that -- that provide for the fire department? 13 A. There is an annual budget that is 14 provided to us from the City. And we have 15 income from a few other sources. 16 Q. What sources would those be? 17 A. One of the major ones is we bill 18 for EMS transport. It is a soft bill system. 19 Q. What do you mean by "soft bill"? 20 A. A bill is sent, and if the -- if 21 the resident's insurance pays for it, 22 wonderful, and if they don't, we don't bill 23 again. We don't make an issue of it. 24 Q. You mentioned income from a few 25 other sources. I understand EMS billing is one</p>
<p style="text-align: right;">Page 215</p> <p>1 Q. This obviously is voluminous. 2 We're only going to look at a few pages, so if 3 you want to look at the front page to 4 familiarize yourself and then we can direct you 5 to some specifics. 6 I apologize, but we're required to 7 print the whole thing for the witness. 8 A. Okay. 9 Q. Chief, do you recognize Defendants' 10 Exhibit 10? 11 A. I do not recognize it, but I 12 believe I realize what it is. 13 Q. Let me represent to you that it 14 appears to be the 2017 budget for the City of 15 Akron. 16 A. Yes. 17 Q. Do you see that? 18 Have you seen this book before? 19 This budget plan before? 20 A. Not in its entirety, like this. So 21 in a -- in a format approximately like what you 22 have in your hand. 23 Q. Before we look at specific pages -- 24 A. Okay. 25 Q. -- Chief, at a general level, how</p>	<p style="text-align: right;">Page 217</p> <p>1 of them. Are there any others that come to 2 mind? 3 A. Yes. We currently have an 4 agreement with American Medical Response, or 5 AMR, to do our Code 2 transports. And if they 6 do not arrive on scene in a timely manner, then 7 they are basically fined. So that is 8 another -- another way we have income. 9 Q. Any others come to mind? 10 A. That's all I can think of. And 11 again, I'd refer you to District Chief Kaut. 12 Q. Also the grants we discussed 13 earlier, those are sources of funding for the 14 department? 15 A. It is. Multiple. 16 Q. Okay, Chief. If you look at 17 page -- what's marked as page 172 on the bottom 18 of the budget document. 19 A. Okay. 20 Q. Defendants' Exhibit 10. 21 A. Okay. 22 Q. Do you see the bottom of that page, 23 the section that reads, "Department sources and 24 uses of funds by funding category 2017"? 25 A. Yes.</p>

<p style="text-align: right;">Page 218</p> <p>1 Q. Do you understand the difference 2 between the general fund, the special revenue 3 fund, and the trust and agency fund? 4 A. Vaguely. 5 Q. What's your best understanding? 6 A. The general fund is the general 7 fund for the City of Akron, and it includes 8 most of the money that the City has gathered 9 together from taxes and other sources of our 10 city. 11 The special revenue fund and the 12 trust and agency fund, I have no idea. I'd 13 refer to District Chief Kaut. 14 Q. Do you know to the extent that 15 the -- strike that. 16 The income that the EMS -- the 17 income that the fire department receives from 18 the EMS services that we just discussed -- 19 A. Yes. 20 Q. -- would that be reflected in one 21 of these three line items? 22 A. Again, I'd defer to Chief Kaut. 23 Q. You're not sure one way or the 24 other? 25 A. No.</p>	<p style="text-align: right;">Page 220</p> <p>1 Q. The agreement with AMR that you 2 referenced a few moments ago -- 3 A. Yes. 4 Q. -- if memory serves -- and correct 5 me if I'm wrong -- but there are certain 6 circumstances in which AMR will transport a 7 patient from the site of the incident to the 8 hospital? 9 A. Correct. 10 Q. That's subject to a contract that 11 AMR has with the City? 12 A. Yes. 13 Q. And you mentioned that there are 14 circumstances in which the fire department can 15 levy a fine if AMR is -- is late? 16 A. Yes. 17 Q. Do you know how often that happens? 18 A. It varies. There are times when 19 there are quite a few 15-minute -- because 20 basically they need to be on scene in 15 21 minutes after we ask for them. There are times 22 when they do very well and other times when not 23 so much. 24 Q. Is there any pattern to their 25 performance that you're aware of?</p>
<p style="text-align: right;">Page 219</p> <p>1 Q. Have you seen this page before, by 2 the way? 3 A. This specific page? No. 4 Q. If you look at the top panel of 5 that page, Chief, it reads, "Detailed summary 6 of expenditures by category." 7 A. Yes. 8 Q. Do you see that? 9 Just eyeballing those lists of line 10 items, does that appear to account for the 11 major categories of expenditures from the fire 12 department? 13 A. Again, I'd have to defer to Chief 14 Kaut. 15 Q. Chief, have you ever seen any fire 16 department budget or other document, any type 17 of line item that is dedicated exclusively to 18 costs associated with the opioid epidemic? 19 MS. LEYIMU: Object to the form. 20 A. In this budget, no, I've not seen 21 anything to that effect at all. 22 Q. And besides this budget, have you 23 ever seen anything like that in -- in another 24 budget or other document? 25 A. Specifically for opiates? No.</p>	<p style="text-align: right;">Page 221</p> <p>1 A. Not that I'm aware of. 2 Q. Do you have any sense of -- of how 3 much money the -- the fire department has 4 collected in fines in a given year? 5 MS. LEYIMU: Object to the form of 6 the question. 7 A. I do not. 8 Q. District Chief Kaut -- 9 A. Yes. 10 Q. -- might know? 11 A. Correct. 12 Q. I understand you may not know 13 specifics, but do you have a general sense of 14 how often this is happening? 15 MS. LEYIMU: Object to the form of 16 the question. 17 A. No. 18 Q. Is it, for example, a daily thing, 19 or less frequently than that? 20 MS. LEYIMU: Object to the form. 21 A. What I can tell you is we average 22 somewhere around 120 calls per day. And so a 23 good percentage of those calls -- and I'm not 24 sure what the percentage is -- are what we call 25 Code 2 transports.</p>

<p style="text-align: right;">Page 222</p> <p>1 For Code 2 transports, that is the</p> <p>2 agreement we have with AMR for non-emergency</p> <p>3 transport. But I could not tell you how many</p> <p>4 per day or what the average is. That I would</p> <p>5 defer to District Chief Natko. He would have</p> <p>6 those figures.</p> <p>7 Q. Is -- is Akron Fire Department</p> <p>8 satisfied with the performance of AMR?</p> <p>9 MS. LEYIMU: Object to the form of</p> <p>10 the question.</p> <p>11 A. I think that's subjective, but not</p> <p>12 always.</p> <p>13 Q. I -- I would assume -- correct me</p> <p>14 if I'm wrong, but I assume your preference</p> <p>15 would be that they're never late to an</p> <p>16 incident?</p> <p>17 A. That would be our preference.</p> <p>18 Q. And to your knowledge, has the City</p> <p>19 ever considered using a different ambulance</p> <p>20 vendor for this type of service?</p> <p>21 MS. LEYIMU: Object to the form of</p> <p>22 the question.</p> <p>23 A. We have discussed it, but there are</p> <p>24 no other ambulance companies in the Akron area</p> <p>25 that can handle this volume of calls.</p>	<p style="text-align: right;">Page 224</p> <p>1 Q. To clarify one thing. On the</p> <p>2 definition of a Code 2 patient, are all</p> <p>3 suspected overdoses carried by AFD to the</p> <p>4 hospital?</p> <p>5 A. I cannot make that statement.</p> <p>6 There are some that are Code 3 transports,</p> <p>7 which means the Akron Fire will transport. And</p> <p>8 there are some --</p> <p>9 Again, each -- each individual call</p> <p>10 is evaluated. You have an evaluation done by</p> <p>11 our paramedics. We then will call a hospital.</p> <p>12 It'd be regardless of which hospital they want</p> <p>13 to go to. Call that hospital and talk to that</p> <p>14 emergency room physician, and that physician</p> <p>15 makes the final determination as to whether</p> <p>16 it's a Code 1, 2 or 3 transport.</p> <p>17 And so there is no standard, I</p> <p>18 would say. Each case -- each individual call</p> <p>19 is different.</p> <p>20 Q. So there's no, per se, policy, for</p> <p>21 example, that any suspected overdose must be</p> <p>22 transported by AFD?</p> <p>23 MS. LEYIMU: Object to the form of</p> <p>24 the question.</p> <p>25 A. There is no mandate that it has --</p>
<p style="text-align: right;">Page 223</p> <p>1 Q. When AMR transports a patient -- a</p> <p>2 Code 2 patient, do they bill the patient for</p> <p>3 their services?</p> <p>4 A. Yes.</p> <p>5 Q. Do you know if they have the same,</p> <p>6 I believe you said, soft bill policy --</p> <p>7 MS. LEYIMU: Object to the form of</p> <p>8 the question.</p> <p>9 Q. -- as the fire department?</p> <p>10 MS. LEYIMU: Oh, sorry. Object to</p> <p>11 the form.</p> <p>12 A. I mean, I'm not aware of what their</p> <p>13 billing policy is.</p> <p>14 Q. The contract between the City and</p> <p>15 AMR, does AMR pay for the right to be the</p> <p>16 exclusive provider or transport for these Code</p> <p>17 2 patients?</p> <p>18 MS. LEYIMU: Object to the form.</p> <p>19 A. Not that I'm aware.</p> <p>20 Q. So the only -- to your knowledge,</p> <p>21 the only money that's exchanging between the</p> <p>22 City and AMR pursuant to this contract are</p> <p>23 these fines for tardy performance?</p> <p>24 A. To the best of my recollection,</p> <p>25 yes.</p>	<p style="text-align: right;">Page 225</p> <p>1 that person has to be transported by AFD. It</p> <p>2 is all at the determination of the emergency</p> <p>3 room physician.</p> <p>4 Q. You can put this away, Chief.</p> <p>5 Chief, sitting here today, do you</p> <p>6 know how much the City -- or the fire</p> <p>7 department, I should say, spent in 2018 on</p> <p>8 taking 911 calls that were related to opioid</p> <p>9 overdoses?</p> <p>10 MS. LEYIMU: Object to the form.</p> <p>11 A. No.</p> <p>12 Q. Have you ever seen such a number?</p> <p>13 A. Specifically for opioid calls, not</p> <p>14 to my recollection.</p> <p>15 Q. Do you know, sitting here today,</p> <p>16 how much the City spent in 2018 in EMS runs</p> <p>17 related to suspected opiate overdoses?</p> <p>18 A. No. I'd defer to Chief Kaut.</p> <p>19 Q. And a number like that has never</p> <p>20 crossed your desk?</p> <p>21 A. No.</p> <p>22 Q. Sitting here today, do you know how</p> <p>23 much the City spent in 2018 on training EMS</p> <p>24 personnel to respond to opiate incidents?</p> <p>25 A. No.</p>

<p style="text-align: right;">Page 226</p> <p>1 Q. Again, Chief Kaut would be the</p> <p>2 person to ask?</p> <p>3 A. Correct.</p> <p>4 MS. LEYIMU: Object to the form.</p> <p>5 Q. And forgive me if I asked this</p> <p>6 earlier. The -- the costs that the City -- I'm</p> <p>7 sorry -- that Akron Fire Department spent on</p> <p>8 Narcan in 2018, do you know that number today?</p> <p>9 A. No.</p> <p>10 Q. And who would be the right person?</p> <p>11 A. That would be Chief Kaut.</p> <p>12 Q. The same?</p> <p>13 Switching the question very</p> <p>14 slightly, Chief. Do you know how much it costs</p> <p>15 the department for an individual run that's</p> <p>16 related to a suspected opiate overdose?</p> <p>17 MS. LEYIMU: Object to the form of</p> <p>18 the question. Asked and answered.</p> <p>19 A. Repeat the question, please.</p> <p>20 Q. Sure. I'm asking for a given</p> <p>21 individual run, EMS run --</p> <p>22 A. Okay.</p> <p>23 Q. -- that's related to a suspected</p> <p>24 opiate overdose. Do you know how much that</p> <p>25 costs the department?</p>	<p style="text-align: right;">Page 228</p> <p>1 MS. LEYIMU: Object to the form of</p> <p>2 the question.</p> <p>3 Q. Is that fair?</p> <p>4 A. That is correct.</p> <p>5 MR. LANNIN: This will be</p> <p>6 Defendants' Exhibit 11.</p> <p>7 - - - - -</p> <p>8 (Thereupon, Deposition Exhibit 11,</p> <p>9 March 2018 E-Mail Chain Re: % of</p> <p>10 Non-Violent Safety Force Calls</p> <p>11 Related to Opioid Addiction and</p> <p>12 Mental Health, AKRON_000236377 to</p> <p>13 AKRON_000236379, was marked for</p> <p>14 purposes of identification.)</p> <p>15 - - - - -</p> <p>16 MR. LANNIN: Can we go off for one</p> <p>17 moment?</p> <p>18 THE VIDEOGRAPHER: Off the record,</p> <p>19 3:00.</p> <p>20 (A recess was taken.)</p> <p>21 THE VIDEOGRAPHER: We're back on</p> <p>22 the record, 3:16.</p> <p>23 BY MR. LANNIN:</p> <p>24 Q. Chief, just before I spilled water</p> <p>25 everywhere, I had handed you Defendants'</p>
<p style="text-align: right;">Page 227</p> <p>1 A. No.</p> <p>2 Q. Has a number like that ever crossed</p> <p>3 your desk?</p> <p>4 MS. LEYIMU: Object to the form.</p> <p>5 A. Not that I can recall.</p> <p>6 Q. If -- if one was looking to</p> <p>7 determine the number of EMS runs that your</p> <p>8 department went on in a given year that were</p> <p>9 related -- definitively related to an opioid</p> <p>10 overdose, would you need to examine the run</p> <p>11 reports to make that evaluation?</p> <p>12 MS. LEYIMU: I'll object to the</p> <p>13 form.</p> <p>14 A. No, because I don't think the run</p> <p>15 reports are going to give you an accurate</p> <p>16 number.</p> <p>17 I think you would need to get</p> <p>18 information from the hospitals, as well as from</p> <p>19 the doctors. Because there may be an overdose,</p> <p>20 and it could be something else.</p> <p>21 Q. That's for the reasons you said</p> <p>22 earlier, that the doctors or the hospital will</p> <p>23 have the best information at the end of the day</p> <p>24 about the actual cause of the suspected</p> <p>25 overdose?</p>	<p style="text-align: right;">Page 229</p> <p>1 Exhibit 11. Please take as much time as you</p> <p>2 need, but let me know when you're ready to</p> <p>3 discuss that document.</p> <p>4 A. Okay.</p> <p>5 Okay.</p> <p>6 Q. Chief, do you recognize Defendants'</p> <p>7 11?</p> <p>8 A. Yes.</p> <p>9 Q. And what is it?</p> <p>10 A. It's an e-mail, in this case from</p> <p>11 me to Deputy Mayor Brown, with some information</p> <p>12 that I had requested from District Chief Natko.</p> <p>13 Q. Before we dig into the e-mail, any</p> <p>14 reason to doubt that this is an e-mail that you</p> <p>15 sent?</p> <p>16 A. No.</p> <p>17 Q. The -- it appears that the request</p> <p>18 originated with a Russell Neal to Deputy Mayor</p> <p>19 Brown, the first e-mail on that chain.</p> <p>20 Do you see that?</p> <p>21 A. Yes.</p> <p>22 Q. Do you know who Russell Neal is?</p> <p>23 A. Yes. He is our Ward 4 council</p> <p>24 person.</p> <p>25 Q. In that e-mail, Mr. Neal had</p>

<p style="text-align: right;">Page 230</p> <p>1 written to Deputy Mayor Brown, "Please give 2 council the percentage of nonviolent calls made 3 by the police and fire that related to an 4 opioid- or a drug-related call or mental 5 health-related issue." 6 Do you see that? 7 A. I do. 8 Q. And it says, "Please also give us 9 the cost per call." 10 As you said, it then gets 11 transferred, and it comes to you, and you send 12 it to District Chief Natko. Is that fair? 13 A. Yes. 14 Q. So Chief Natko's response begins to 15 you -- well, it appears to report results from 16 what he terms a "reporting database." 17 Do you see that term in his first 18 sentence? 19 A. I'm sorry. Say again. 20 Q. The very first sentence in his 21 e-mail reads, "Our reporting database." 22 A. Yes. 23 Q. Do you see that? 24 Do you understand what that refers 25 to, the reporting database?</p>	<p style="text-align: right;">Page 232</p> <p>1 it's in response to the question from Russ 2 Neal. He's asking for percentage of nonviolent 3 calls made by both police and fire related to 4 an opiate- or a drug-related call. I think 5 that's why you see the opiate/drug category. 6 Q. But you're not sure one way or the 7 other how Chief Natko determined what calls fit 8 into that category? 9 A. No. 10 Q. It reports that those 1,279 calls 11 represent 2.8 percent of the total volume for 12 2017. Do you see that? 13 A. Yes. 14 Q. Is the fact that opioid/drug-related 15 calls accounted for less than 3 percent of 16 calls in 2017 consistent with your own 17 experience? 18 MS. LEYIMU: Object to the form of 19 the question. 20 A. I wouldn't word it that way. I'd 21 say that from what we were able to actually 22 identify as drug- and opiate-related calls, 23 this is the percentage that Chief Natko thought 24 we had. 25 Q. And you -- there's no reason that</p>
<p style="text-align: right;">Page 231</p> <p>1 A. Actually, I am not sure of which 2 database he's referring to. 3 Q. He then appears to report 4 statistics for the number of calls that were 5 related to, for example, opioid/drug. Do you 6 see that? 7 A. Yes. 8 Q. And for 2017, he reports there were 9 1,279 calls. Do you see that statistic? 10 A. I do. 11 Q. Do you have any understanding of -- 12 of how he would have gathered that number? 13 A. I do not. 14 Q. Is there a field in a database that 15 is marked "opioid/drug"? 16 MS. LEYIMU: Object to the form. 17 A. You'd have to ask District Chief 18 Natko as to where he received this data or how 19 he came up with this data. I'm not sure. 20 Q. Do you have an understanding of -- 21 of what the category opioid/drug means or 22 captures? 23 MS. LEYIMU: Object to the form. 24 A. I think we'd have to get from Chief 25 Natko exactly what he meant, but it looks like</p>	<p style="text-align: right;">Page 233</p> <p>1 you would doubt or question the statistic that 2 Chief Natko generated? 3 A. No. But I do wonder if this is the 4 complete total number of calls. Again, I don't 5 know how this number was -- was derived, but I 6 have to wonder if this is the -- the -- the 7 actual totality of the calls that we had that 8 were opiate or drug related. 9 Q. Why is that? 10 A. Because of what I mentioned to you 11 before. There are calls that we go on for 12 different types of things that you may not know 13 are drug related but could be, such as a DOA, 14 someone that's obviously been deceased for, you 15 know, a number of days. We may or may not have 16 any idea as to what may have caused that. 17 Q. The 2.8 percent statistic that 18 Judge -- I'm sorry, that Chief Natko reports -- 19 A. Yes. 20 Q. -- that's less than you would have 21 expected if someone asked you to estimate the 22 same number? 23 MS. LEYIMU: Object to the form of 24 the question. 25 A. I believe it's less than the actual</p>

<p style="text-align: right;">Page 234</p> <p>1 number. I would say that is correct.</p> <p>2 Q. Chief, I just want to understand,</p> <p>3 because I asked you if you had reason to doubt</p> <p>4 the statistics that Chief Natko generated, and</p> <p>5 you told me no.</p> <p>6 A. Okay.</p> <p>7 Q. So now are you second-guessing him?</p> <p>8 Are these accurate or not?</p> <p>9 MS. LEYIMU: Object to the form of</p> <p>10 the question. Asked and answered.</p> <p>11 A. I believe these are the best</p> <p>12 statistics that we could put together at the</p> <p>13 time, but are they accurate? I don't know.</p> <p>14 Q. Have you heard before anecdotally</p> <p>15 that calls related to opioid/drug incidents</p> <p>16 accounted for such a small fraction of the</p> <p>17 overall total?</p> <p>18 MS. LEYIMU: Object to the form of</p> <p>19 the question.</p> <p>20 A. Repeat the question, please.</p> <p>21 MR. LANNIN: Read it back.</p> <p>22 (Record read.)</p> <p>23 A. I had not heard that.</p> <p>24 Q. Are you surprised by the number</p> <p>25 here?</p>	<p style="text-align: right;">Page 236</p> <p>1 A. I think this is a number that</p> <p>2 reflects what we were able to do with our</p> <p>3 databases. And again, I don't know what -- how</p> <p>4 Chief Natko came to this number, but I wonder</p> <p>5 if this is a true account of all of the</p> <p>6 opiate/drug-related calls that we have had.</p> <p>7 Because less than 3 percent, it's just a number</p> <p>8 that I question if it is really getting a true</p> <p>9 picture as to what's going on.</p> <p>10 Q. Based on your testimony that in</p> <p>11 2016 things peaked, would you expect that if</p> <p>12 Chief Natko had generated a report of</p> <p>13 statistics for 2016, they would have -- it</p> <p>14 would have been a higher number of calls</p> <p>15 related to drug/opioid?</p> <p>16 MS. LEYIMU: Object to the form.</p> <p>17 Calls for speculation.</p> <p>18 A. Again, I don't know the percentage</p> <p>19 of calls we had for 2016, but I think it's</p> <p>20 higher than 2.8 percent.</p> <p>21 Q. In 2018, the next set of columns</p> <p>22 over, Chief, do you see where he reports 181</p> <p>23 calls through March 7, 2018?</p> <p>24 A. Yes.</p> <p>25 Q. And at that point in the year, that</p>
<p style="text-align: right;">Page 235</p> <p>1 MS. LEYIMU: Object to the form of</p> <p>2 the question.</p> <p>3 A. I am not surprised by the number,</p> <p>4 but I'm not sure as to how these numbers were</p> <p>5 calculated.</p> <p>6 Q. If Chief Natko is correct that</p> <p>7 opioid/drug-related calls accounted for less</p> <p>8 than 3 percent of the calls in 2017, do you</p> <p>9 stand by your testimony earlier this morning</p> <p>10 that the opioid crisis is crippling the fire</p> <p>11 department?</p> <p>12 MS. LEYIMU: Object to the form of</p> <p>13 the question.</p> <p>14 A. I stand by my testimony that the</p> <p>15 opiate/drug epidemic seemed to not only peak</p> <p>16 but also truly exhaust our resources,</p> <p>17 especially in 2016, and it continues to this</p> <p>18 day.</p> <p>19 Q. So there's no inconsistency in your</p> <p>20 mind with calls that account for such a tiny</p> <p>21 fraction of the total, nonetheless, in your</p> <p>22 words, crippling the department?</p> <p>23 MS. LEYIMU: Object to the form.</p> <p>24 Asked and answered several times.</p> <p>25 You can answer.</p>	<p style="text-align: right;">Page 237</p> <p>1 represented, apparently, 2.2 percent of the</p> <p>2 total volume. Do you see that?</p> <p>3 A. Yes.</p> <p>4 Q. Fair to say that the trend was down</p> <p>5 from 2017 to that point in 2018?</p> <p>6 MS. LEYIMU: Object to the form of</p> <p>7 the question.</p> <p>8 A. I will confirm that 2.2 is less</p> <p>9 than 2.8. But again, this may or may not have</p> <p>10 been at a valley or a peak time for which we</p> <p>11 were having calls for opiates.</p> <p>12 Q. Chief, you -- the next -- the next</p> <p>13 line down -- the next row down -- excuse me --</p> <p>14 reads "Mental health."</p> <p>15 Do you see that?</p> <p>16 A. Yes.</p> <p>17 Q. Do you have an understanding what</p> <p>18 mental health captures? What types of -- what</p> <p>19 types of calls that means?</p> <p>20 A. I believe I know what he's</p> <p>21 referring to, but I'm not 100 percent sure.</p> <p>22 Q. What's your best guess?</p> <p>23 A. My best guess would be that when he</p> <p>24 says a mental health call is a call to someone</p> <p>25 that is having a -- a mental disturbance.</p>

<p style="text-align: right;">Page 238</p> <p>1 Q. Again, do you know one way or the</p> <p>2 other how Chief -- I'm sorry -- how Chief Natko</p> <p>3 would have queried the system to come up with</p> <p>4 those statistics for mental health calls?</p> <p>5 A. I do not.</p> <p>6 Q. The next line down, Chief, reads,</p> <p>7 "The cost per call for a four-person AFD</p> <p>8 ambulance is \$155.05 per call."</p> <p>9 Do you see that?</p> <p>10 A. Yes.</p> <p>11 Q. Do you know how Chief Natko</p> <p>12 calculated that number?</p> <p>13 A. I do not.</p> <p>14 Q. Have you seen a number like that</p> <p>15 before?</p> <p>16 A. Not that I can recollect, but this</p> <p>17 does not surprise me.</p> <p>18 Q. And why is that?</p> <p>19 A. When you consider four people on an</p> <p>20 ambulance, when you consider their salaries,</p> <p>21 their vehicle itself, maintenance and</p> <p>22 everything else that would be involved, that it</p> <p>23 would be at least this much.</p> <p>24 Q. Do you interpret this result as</p> <p>25 being the average cost per call for a</p>	<p style="text-align: right;">Page 240</p> <p>1 used would cost more than a short 10-minute</p> <p>2 scraped ankle kind of call. Does that seem</p> <p>3 fair?</p> <p>4 A. That is fair.</p> <p>5 Q. So that was my question. If -- if</p> <p>6 this \$155 number was the average of all</p> <p>7 calls --</p> <p>8 MS. LEYIMU: Object to --</p> <p>9 Q. Do you know one way or the other?</p> <p>10 MS. LEYIMU: Object to the form.</p> <p>11 Calls for speculation. Asked and answered.</p> <p>12 A. I do not know that to be fact. I</p> <p>13 think we need to ask Chief Natko to be sure.</p> <p>14 Q. Have you ever seen a statistic</p> <p>15 reporting on the cost per call for calls that</p> <p>16 are suspected opiate overdoses?</p> <p>17 A. Not that I can recollect.</p> <p>18 Q. Has anyone ever asked you to</p> <p>19 generate such a number?</p> <p>20 A. It would not surprise me, but I</p> <p>21 cannot recollect a number. There have been a</p> <p>22 number of times where we have tried to</p> <p>23 calculate how much are we spending per calls,</p> <p>24 how much should we be billing for calls of</p> <p>25 different types. And so it's something that I</p>
<p style="text-align: right;">Page 239</p> <p>1 four-person AFD ambulance?</p> <p>2 MS. LEYIMU: Object to the form.</p> <p>3 Calls for speculation.</p> <p>4 A. What is an average call?</p> <p>5 The problem is you're trying to add</p> <p>6 something that is a movable number on</p> <p>7 something. It's a movable number that -- and</p> <p>8 we're trying to actually lock it down.</p> <p>9 And I'll give you an example. A</p> <p>10 call that lasts for 10 minutes, if you look at</p> <p>11 the personnel costs and everything else, is</p> <p>12 going to be very small.</p> <p>13 A cost for something where we -- we</p> <p>14 are an hour with treatment, administering</p> <p>15 expensive drugs, transport to the hospital, use</p> <p>16 of other equipment to -- to try to stabilize</p> <p>17 this victim as we transport to the hospital is</p> <p>18 going to be extremely high. So it's a movable</p> <p>19 number depending on the call itself.</p> <p>20 Q. Thank you. You gave a better</p> <p>21 answer to my question than I -- than I asked,</p> <p>22 and that was what I meant, sir.</p> <p>23 And my -- my surmise was that, for</p> <p>24 example, a long call, a gunshot wound, for</p> <p>25 example, using whatever methodology Chief Natko</p>	<p style="text-align: right;">Page 241</p> <p>1 think we -- we get asked quite frequently.</p> <p>2 Q. You don't remember specifically</p> <p>3 being asked to generate this type of statistic</p> <p>4 for a call related to a suspected opiate</p> <p>5 overdose?</p> <p>6 A. I remember this specific e-mail,</p> <p>7 but I cannot tell you for sure one way or the</p> <p>8 other how many other calls for cost or</p> <p>9 percentages that I've received. Because,</p> <p>10 again, like I said before, we're averaging -- I'm</p> <p>11 averaging 80 to 100 e-mails a day.</p> <p>12 Q. Understood. So, Chief, District --</p> <p>13 District Chief Natko sent this to you at</p> <p>14 a.m., and it looks like you forwarded the</p> <p>15 document to Deputy Chief Brown -- I'm sorry --</p> <p>16 Deputy Mayor Brown and Council Member Neal at</p> <p>17 10:18 a.m., about 30 minutes later. Do you see</p> <p>18 that?</p> <p>19 A. Yes.</p> <p>20 Q. Did you -- after you received the</p> <p>21 e-mail from -- from Chief Natko, did you ask</p> <p>22 him additional questions about the numbers or</p> <p>23 attempt to verify what had been forwarded to</p> <p>24 you?</p> <p>25 MS. LEYIMU: Object to the form.</p>

<p style="text-align: right;">Page 242</p> <p>1 A. I did not ask him to verify. I 2 simply forwarded the information he sent to me 3 to Deputy Mayor Brown. 4 Q. When you saw this e-mail from -- 5 from Chief Natko, did you have any of the 6 concerns or questions that you had expressed to 7 me today about the numbers? 8 MS. LEYIMU: Object to the form. 9 A. I did not ask Chief Natko about the 10 numbers that he submitted to me. 11 Q. And you -- you weren't 12 sufficiently -- you didn't have concerns about 13 the numbers that would have prevented you from 14 forwarding them on to your boss or to the 15 council member 30 minutes later? 16 MS. LEYIMU: Object to the form of 17 the question. 18 A. I did not have strong enough 19 concerns to not forward the e-mail, because 20 obviously I did. 21 Q. Generally, have you found Chief 22 Natko to be a -- a dependable employee? 23 A. Absolutely. 24 Q. He -- he provides reliable 25 information to you?</p>	<p style="text-align: right;">Page 244</p> <p>1 A. Again, without knowing how he was 2 able to come to these numbers, it did not 3 strike me at that time to be important enough 4 to question him as to how he devised these 5 numbers and percentages. 6 Q. All right. You can put that away, 7 Chief. 8 - - - - - 9 (Thereupon, Deposition Exhibit 12, 10 The City of Akron, Ohio Plaintiff's 11 Second Supplemental Response and 12 Objections to Distributor 13 Defendants' Interrogatory No. 18 14 Pursuant to the Court's November 21, 15 2018 Order, was marked for purposes 16 of identification.) 17 - - - - - 18 Q. This is Defendants' Exhibit 12. 19 Another somewhat lengthy document. You're 20 welcome to review it, but I will direct you to 21 certain passages. 22 A. Okay. 23 Q. Chief, have you seen Defendants' 24 Exhibit 12 before? 25 A. I cannot recall seeing this</p>
<p style="text-align: right;">Page 243</p> <p>1 A. Yes. 2 MR. LANNIN: Can we go off for a 3 moment? 4 THE VIDEOGRAPHER: Off the record, 5 3:35. 6 (Off the record.) 7 THE VIDEOGRAPHER: We're back on 8 the record. The time is 3:37. 9 BY MR. LANNIN: 10 Q. Okay, Chief. Just to repeat the 11 question I just asked. I'm not sure we caught 12 it. I had asked you if you found Chief Natko 13 to be a reliable employee? 14 A. Yes. 15 Q. And he provides you with 16 dependable, reliable information? 17 A. Yes. 18 Q. And, Chief, just to -- to nail it 19 down. If -- if after receiving Chief Natko's 20 information you had reservations about the 21 reliability of the numbers or concerns about 22 their accuracy, would you have expressed those 23 in your e-mail forwarding the numbers to Deputy 24 Chief Brown [sic] and Council Member Neal? 25 MS. LEYIMU: Object to the form.</p>	<p style="text-align: right;">Page 245</p> <p>1 document. 2 Q. Let me represent to you, sir, that 3 these are what are called interrogatory 4 responses. That means that the Defendants in 5 this case have put certain questions to the 6 Plaintiffs -- 7 A. Okay. 8 Q. -- and they're required to provide 9 a written response to those questions to the 10 best of their ability. 11 A. Okay. 12 Q. My questions concern a certain 13 interrogatory, No. 18. 14 If you turn to page 5 of that 15 document, do you see the first section there 16 reads "Interrogatory No. 18"? 17 A. Yes. 18 Q. And it reads, "Specify each 19 category of injury, e.g., increased cost of law 20 enforcement, fire, emergency services, 21 et cetera, for which you claim damages in the 22 litigation and provide a computation of damages 23 for each category of injury alleged." 24 Do you see that? 25 A. I do.</p>

<p style="text-align: right;">Page 246</p> <p>1 Q. Essentially, sir, this</p> <p>2 interrogatory asks for a computation of how</p> <p>3 much money the Plaintiffs are asking for to</p> <p>4 recover from Defendants.</p> <p>5 A. Okay.</p> <p>6 Q. Does that make sense?</p> <p>7 A. Yes, it does.</p> <p>8 Q. If you turn to the following page,</p> <p>9 page 6, which is part of the City's response to</p> <p>10 that question, near the bottom of that page,</p> <p>11 the first full paragraph that begins</p> <p>12 "Plaintiff's computation," do you see that?</p> <p>13 A. Yes.</p> <p>14 Q. "Plaintiff's computation based on</p> <p>15 Plaintiff's preliminary review of its records</p> <p>16 and an estimate of the Plaintiff's damages as</p> <p>17 of the date of this response is provided in</p> <p>18 Exhibit 2."</p> <p>19 Do you see that?</p> <p>20 A. Yes.</p> <p>21 Q. Last but not least, sir, I'd like</p> <p>22 to direct you to Exhibit 2. It's the very last</p> <p>23 page of the document.</p> <p>24 Do you see that?</p> <p>25 A. I do.</p>	<p style="text-align: right;">Page 248</p> <p>1 Q. I think what you just said is fine,</p> <p>2 but I wouldn't want you to go any further than</p> <p>3 that in terms of content.</p> <p>4 A. Okay.</p> <p>5 Q. Did anyone ask you to look at these</p> <p>6 numbers -- strike that.</p> <p>7 I understand you haven't seen this</p> <p>8 particular Exhibit 2 before, but did anyone ask</p> <p>9 you to review or verify the numbers that are</p> <p>10 otherwise reflected in this exhibit?</p> <p>11 MS. LEYIMU: Object to the form.</p> <p>12 A. Not that I'm aware.</p> <p>13 Q. You don't have any understanding of</p> <p>14 how these numbers were generated?</p> <p>15 MS. FLOWERS: Asked and answered.</p> <p>16 A. No.</p> <p>17 Q. Would you have expected someone to</p> <p>18 ask you to verify these numbers before they</p> <p>19 were provided to the Defendants in this case?</p> <p>20 MS. LEYIMU: Object to the form of</p> <p>21 the question.</p> <p>22 Q. As Chief of the department?</p> <p>23 A. Not necessarily, no.</p> <p>24 Q. And why is that?</p> <p>25 A. Because this is a specific document</p>
<p style="text-align: right;">Page 247</p> <p>1 Q. To make sure we're clear, have you</p> <p>2 seen Exhibit 2 before, Chief?</p> <p>3 A. No.</p> <p>4 Q. To your knowledge, did anyone ask</p> <p>5 you to provide information or prepare any of</p> <p>6 the statistics that are reported in this</p> <p>7 exhibit?</p> <p>8 A. Not me directly, no.</p> <p>9 Q. What -- what do you mean by "not me</p> <p>10 directly"?</p> <p>11 A. This was not -- like in the former</p> <p>12 thing that you showed me, the last thing that</p> <p>13 you showed me, there was a question that was an</p> <p>14 e-mail that was sent to me asking for specific</p> <p>15 information. They may have gotten this</p> <p>16 information directly from Natko or Kaut. This</p> <p>17 is not -- did not come directly to me, that</p> <p>18 I'm -- that I'm aware of.</p> <p>19 Q. Understood, Chief.</p> <p>20 And -- and let me caution you,</p> <p>21 please. As we discuss this document, I -- I</p> <p>22 don't want you to tell me anything specific</p> <p>23 that a lawyer might have asked you or said to</p> <p>24 you.</p> <p>25 A. Okay.</p>	<p style="text-align: right;">Page 249</p> <p>1 for this litigation. It's not an operational</p> <p>2 document for the Akron Fire Department.</p> <p>3 Q. Sitting here today, can you vouch</p> <p>4 one way or the other for the accuracy of these</p> <p>5 numbers?</p> <p>6 A. I cannot.</p> <p>7 MS. LEYIMU: Object to form.</p> <p>8 Q. You're not prepared to do so?</p> <p>9 A. No.</p> <p>10 MR. LANNIN: Chief, I believe</p> <p>11 that's all I have for you, but I'm afraid some</p> <p>12 of my colleagues might have a few additional</p> <p>13 questions.</p> <p>14 THE WITNESS: Okay. Thank you.</p> <p>15 MR. LANNIN: Why don't we go off</p> <p>16 really quick.</p> <p>17 THE VIDEOGRAPHER: Off the record,</p> <p>18 3:46.</p> <p>19 (Recess taken.)</p> <p>20 THE VIDEOGRAPHER: We're back on</p> <p>21 the record, 3:54.</p> <p>22 EXAMINATION OF CLARENCE I. TUCKER</p> <p>23 BY MR. CARTER:</p> <p>24 Q. Good afternoon, Chief.</p> <p>25 A. Good afternoon.</p>

<p style="text-align: right;">Page 250</p> <p>1 Q. We met earlier this morning, but my 2 name is Ed Carter, and I have a couple 3 questions for you this afternoon. All right? 4 A. Okay. 5 Q. The same ground rules as before. 6 If you don't understand my question or need me 7 to rephrase, will you let me know? 8 A. Sure. 9 Q. And I don't expect it will take too 10 long, but if for any reason your back acts up 11 or you need a break, will you let me know? 12 A. Yes. 13 Q. Okay. Sitting here today, if I 14 asked you to predict the costs that Akron Fire 15 will incur in 2019 related specifically to 16 opiates, what would -- would you be able to do 17 that? 18 A. No. 19 Q. Do you have any idea where to start 20 in terms of that number? 21 MS. LEYIMU: Object to the form. 22 A. I would start by requesting 23 information from District Chief Natko. 24 Q. Okay. But in terms of what that 25 actual number would be, sitting here today, do</p>	<p style="text-align: right;">Page 252</p> <p>1 Q. Okay. Sitting here today, are you 2 able to identify any prescription for opioids 3 that was written in the City of Akron that you 4 believe was medically unnecessary? 5 MS. LEYIMU: Object to the form of 6 the question. 7 A. Please repeat the question. 8 Q. Sure. Sitting here today, can you 9 identify any improper or unnecessary 10 prescription for opioid pills in Summit County? 11 MS. LEYIMU: Objection. 12 A. I believe my prescription for an 13 opioid when it was prescribed to me was 14 something that was unnecessary or more than 15 what was needed, but for any of the others, I 16 am not qualified to say yes or no. 17 Q. Okay. And during your time with 18 Akron Fire, have you ever reported any 19 physician to a board of medicine, a board of 20 pharmacy, or law enforcement as a result of 21 your suspicion of their medical practices 22 related to prescribing opioids? 23 A. No. 24 Q. Okay. If you saw evidence of a 25 doctor who was engaged in inappropriate conduct</p>
<p style="text-align: right;">Page 251</p> <p>1 you have a best estimate? 2 A. I really don't. 3 Q. Okay. The same question for 2020. 4 Do you -- are you able to estimate the costs 5 that Akron Fire will incur as a result of 6 opiates in 2020? 7 MS. LEYIMU: Object to the form. 8 A. No. 9 Q. The same question for 2021. 10 MS. LEYIMU: The same objection. 11 A. No. 12 Q. The same question for any of the 13 next 10 years in the future. 14 MS. LEYIMU: The same objection. 15 A. Well, it changes, because the next 16 year after that I am no longer an employee of 17 the City of Akron. 18 Q. Okay. So fair point. 19 A. I'll be retired. 20 Q. So what about -- yeah. So for the 21 last year that you'll be on the force, are you 22 able to estimate the costs the department will 23 incur related to opioids? 24 MS. LEYIMU: Object to the form. 25 A. No.</p>	<p style="text-align: right;">Page 253</p> <p>1 in prescribing things that they shouldn't have, 2 is that something that you would have reported 3 to the appropriate authorities? 4 MS. LEYIMU: Object to the form of 5 the question. 6 A. It's actually my responsibility to 7 report anything that I would see that would be 8 inappropriate, but in this case I'm not sure I 9 would be able to recognize what would be 10 inappropriate for a doctor to prescribe. 11 Q. Okay. Sitting here today, are you 12 able to identify any specific cost that Akron 13 Fire has incurred during your time on the force 14 that you would attribute to any specific 15 Defendant in this case? 16 A. Specific Defendant? 17 Q. Yes. 18 A. No. 19 Q. In terms of -- I want to switch 20 topics and talk about your training and 21 experience. 22 Do you consider yourself to be an 23 expert in epidemiology? 24 A. No. 25 Q. Are you an expert in pharmacology?</p>

<p style="text-align: right;">Page 254</p> <p>1 A. No.</p> <p>2 Q. Are you an expert in mental health?</p> <p>3 A. No.</p> <p>4 Q. Are you an expert in addiction?</p> <p>5 A. No.</p> <p>6 Q. Are you an expert in marketing?</p> <p>7 A. No.</p> <p>8 Q. Are you an expert in evaluating the</p> <p>9 efficacy of warning label language on consumer</p> <p>10 products?</p> <p>11 A. No.</p> <p>12 Q. Are you generally -- well, strike</p> <p>13 that.</p> <p>14 Do you agree that there are</p> <p>15 individuals who take prescription opioids and</p> <p>16 do not develop an addiction?</p> <p>17 MS. LEYIMU: Object to the form of</p> <p>18 the question.</p> <p>19 A. It is an assumption. Well, I'll</p> <p>20 take that back. I have taken an opiate once,</p> <p>21 and I did not become addicted. So in</p> <p>22 reality -- so, yes, I know at least one where</p> <p>23 it has not occurred.</p> <p>24 When it comes to others, it would</p> <p>25 be making an assumption.</p>	<p style="text-align: right;">Page 256</p> <p>1 crisis?</p> <p>2 MS. LEYIMU: Object to the form of</p> <p>3 the question.</p> <p>4 A. I would say that fentanyl is one</p> <p>5 specific opiate, and I would not say that we</p> <p>6 are experiencing a crisis just to one specific</p> <p>7 opiate. But I don't know that to be fact. But</p> <p>8 I would --</p> <p>9 But, again, when you say "crisis,"</p> <p>10 it's kind of a -- in my opinion, it's a term</p> <p>11 that what you consider a crisis may not be what</p> <p>12 I consider a crisis. So in this case, I would</p> <p>13 say no.</p> <p>14 Q. Okay. Has Akron previously</p> <p>15 experienced an illicit fentanyl crisis, in your</p> <p>16 opinion?</p> <p>17 MS. LEYIMU: Object to the form.</p> <p>18 A. Not to my knowledge.</p> <p>19 Q. Okay. Has Akron ever experienced a</p> <p>20 carfentanil crisis?</p> <p>21 A. Again, I think our definition of</p> <p>22 "crisis" could -- is going to vary, but in my</p> <p>23 personal opinion, no.</p> <p>24 Q. Okay. I want to ask you about a</p> <p>25 couple numbers to follow up in this area.</p>
<p style="text-align: right;">Page 255</p> <p>1 Q. Right. And that's not an</p> <p>2 assumption you're comfortable making?</p> <p>3 A. No.</p> <p>4 Q. Okay. Are there people who take</p> <p>5 opioids by prescription, become addicted, but</p> <p>6 that do not die as a result of that addiction?</p> <p>7 A. That is another assumption.</p> <p>8 Q. Okay. And you're not comfortable</p> <p>9 making that?</p> <p>10 A. No.</p> <p>11 Q. Okay. What about this one. Do you</p> <p>12 agree that there are people who take opioids</p> <p>13 who are addicted but who do not break the law?</p> <p>14 A. Yes.</p> <p>15 Q. Okay. You were asked some</p> <p>16 questions about whether there was a cocaine</p> <p>17 crisis in Akron or a methamphetamine crisis or</p> <p>18 a heroin crisis. Do you remember that topic of</p> <p>19 discussion from earlier today?</p> <p>20 A. Yes.</p> <p>21 Q. Okay. I want to ask about a couple</p> <p>22 different substances. Is Akron facing a crisis</p> <p>23 with related -- or excuse me. Strike that.</p> <p>24 I'll ask it again.</p> <p>25 Is Akron facing an illicit fentanyl</p>	<p style="text-align: right;">Page 257</p> <p>1 I will represent to you -- and</p> <p>2 these are, for your edification, coming from</p> <p>3 Summit County medical examiner annual reports.</p> <p>4 I'll represent to you that in 2015</p> <p>5 Medical Examiner Kohler certified that there</p> <p>6 were 44 deaths in Summit County attributable to</p> <p>7 cocaine.</p> <p>8 Do you consider, as Chief of Akron</p> <p>9 Fire, 44 cocaine deaths to be a crisis?</p> <p>10 MS. LEYIMU: Object to the form.</p> <p>11 Asked and answered.</p> <p>12 A. No.</p> <p>13 Q. Okay. The number for cocaine</p> <p>14 deaths, according to Medical Examiner Kohler,</p> <p>15 in 2017 was 80 for that year. Do you consider</p> <p>16 80 cocaine deaths to be a crisis?</p> <p>17 MS. LEYIMU: Object to the form.</p> <p>18 Asked and answered.</p> <p>19 A. I think we're starting to get into</p> <p>20 a gray area. Again, the definition of -- what</p> <p>21 is the definition of a crisis? What are you</p> <p>22 expect- -- when I say crisis -- or when you</p> <p>23 say crisis, exactly what do you mean?</p> <p>24 Q. Well, the capacity that I'm asking,</p> <p>25 you are one of the leaders in the community as</p>

<p style="text-align: right;">Page 258</p> <p>1 the Chief of Akron Fire, right?</p> <p>2 A. Correct.</p> <p>3 Q. And I think you told counsel</p> <p>4 earlier that one of your jobs as chief is to</p> <p>5 set the tone and -- you know, as being the</p> <p>6 leader for the department, right?</p> <p>7 A. That is correct.</p> <p>8 Q. So you have an internal role</p> <p>9 managing Akron Fire and you also have an</p> <p>10 external role as a liaison between that</p> <p>11 department and the larger community, correct?</p> <p>12 A. That is correct.</p> <p>13 Q. And so in exercising that</p> <p>14 leadership role and setting the tone, I'm</p> <p>15 asking for your personal view in that</p> <p>16 leadership role. When you would message to the</p> <p>17 citizens of Akron, how you would describe the</p> <p>18 various issues that they're facing? Some, I</p> <p>19 assume, you would think are more pressing than</p> <p>20 others.</p> <p>21 So when I ask about a crisis, I'm</p> <p>22 asking in your capacity as chief of Akron Fire,</p> <p>23 when you would communicate to the public, would</p> <p>24 you -- if -- if the public asked you at an --</p> <p>25 at an event, "Chief Tucker, 2017 we had 80</p>	<p style="text-align: right;">Page 260</p> <p>1 a -- a strong concern.</p> <p>2 Would I use the term "crisis"? I</p> <p>3 think it's -- I think that's more of a personal</p> <p>4 idea as to whether you consider something a</p> <p>5 crisis or not.</p> <p>6 But any death, any fire death, any</p> <p>7 overdose death, any motor vehicle accident</p> <p>8 where we have deaths, all of these are concerns</p> <p>9 and real issues for not just the Akron Fire</p> <p>10 Department, but for this community as a whole,</p> <p>11 and we have a responsibility to try to do what</p> <p>12 we can to decrease -- decrease those numbers.</p> <p>13 Can I call them a crisis? In my</p> <p>14 personal opinion, when you start using the term</p> <p>15 "crisis," you're talking about something that</p> <p>16 not only is spiraling out of control, but it is</p> <p>17 also causing deaths, and I mean many deaths,</p> <p>18 and it's beginning to be something that you can</p> <p>19 no longer handle.</p> <p>20 As in the Akron Fire Department</p> <p>21 being able to handle the volume of calls that</p> <p>22 we've been receiving, it's been a real</p> <p>23 challenge, and it's been something that, again,</p> <p>24 I would call a strong concern because of our</p> <p>25 inability to maintain our -- our number of</p>
<p style="text-align: right;">Page 259</p> <p>1 deaths from cocaine. From Akron Fire's</p> <p>2 perspective, is that a crisis?"</p> <p>3 MS. LEYIMU: Object to the form of</p> <p>4 the question.</p> <p>5 A. I would state it as a concern, but</p> <p>6 not a crisis.</p> <p>7 Q. And so for heroin, in 2015,</p> <p>8 according to the numbers we have, there were</p> <p>9 144 heroin overdose deaths. So if asked by a</p> <p>10 member of the public, "Akron Fire, do you</p> <p>11 consider" --</p> <p>12 Well, I won't do 2015 because you</p> <p>13 weren't the chief. I'll move forward to 2017,</p> <p>14 to be fair.</p> <p>15 So if you were asked in 2017, the</p> <p>16 58 heroin deaths in Akron, are we dealing with</p> <p>17 a heroin crisis as a result of those 58 heroin</p> <p>18 deaths?</p> <p>19 MS. LEYIMU: Object to the form.</p> <p>20 A. The terminology I would use, to put</p> <p>21 it in my own words, I would call it a serious</p> <p>22 concern. One death is a serious concern. Any</p> <p>23 deaths, especially for something that is an</p> <p>24 ongoing or potentially an increasing problem,</p> <p>25 something that increases in -- in number, is</p>	<p style="text-align: right;">Page 261</p> <p>1 resources available to help the public.</p> <p>2 Does that help?</p> <p>3 Q. I think I understand. Thank you.</p> <p>4 A. Okay.</p> <p>5 Q. One related question. Would you</p> <p>6 ever use the word "epidemic" to describe a</p> <p>7 situation where there are 80 cocaine deaths in</p> <p>8 Summit County in 2017 --</p> <p>9 MS. LEYIMU: Object --</p> <p>10 Q. -- or would your answer be similar</p> <p>11 to what you just articulated for crisis?</p> <p>12 MS. LEYIMU: Object to the form of</p> <p>13 the question.</p> <p>14 A. When I think of the term</p> <p>15 "epidemic," I think more of something that is a</p> <p>16 communicable disease. I think of like a flu</p> <p>17 epidemic. Something that is trans- -- you</p> <p>18 know, transferred from one individual to</p> <p>19 another. Never really considered heroin an</p> <p>20 epidemic. And again, that's my personal</p> <p>21 opinion.</p> <p>22 Q. Okay. All right. And in terms of</p> <p>23 a crisis, though, I did hear you testify</p> <p>24 earlier that you think that Akron has</p> <p>25 experienced an opiate crisis, and then you</p>

<p style="text-align: right;">Page 262</p> <p>1 described 2014 and the waves and all of that.</p> <p>2 A. Correct.</p> <p>3 Q. But you -- you would -- is that one</p> <p>4 specific area that you are comfortable using</p> <p>5 the term "crisis"?</p> <p>6 A. The opiate issue, I think, is a</p> <p>7 crisis, simply because, again, the absolute</p> <p>8 total devastation that we -- and I'm talking</p> <p>9 about my people on the Akron Fire Department --</p> <p>10 have witnessed. The -- the repeat overdoses</p> <p>11 from the same individual, sometimes on the same</p> <p>12 day. The -- just the sheer volume of -- of</p> <p>13 calls for the same type of an issue, in my</p> <p>14 personal opinion, has made it a crisis.</p> <p>15 And then to find out that it's not</p> <p>16 just Akron. It's Summit County. It's Ohio.</p> <p>17 It's the country. Those -- those things make</p> <p>18 me think that it is truly a crisis. It's not</p> <p>19 some isolated case that we just hope will go</p> <p>20 away on its own. It's something that has been</p> <p>21 a national problem.</p> <p>22 And there has been, as we saw in</p> <p>23 some of the previous documents, speculation as</p> <p>24 to why. Or does anyone really know the true</p> <p>25 cause? Does anyone really know? Has</p>	<p style="text-align: right;">Page 264</p> <p>1 down -- in describing the waves, that you</p> <p>2 thought, from your opinion, was that pills had</p> <p>3 taken it to another level.</p> <p>4 Do you remember saying that?</p> <p>5 A. I do.</p> <p>6 Q. Okay. And I think you were also</p> <p>7 asked if you had specific data to back that up,</p> <p>8 and my notes say that you said you didn't have</p> <p>9 the data, but that was your opinion.</p> <p>10 Am I at least understanding your</p> <p>11 testimony correct so far?</p> <p>12 MS. LEYIMU: Object to the form of</p> <p>13 the question.</p> <p>14 Q. Well, let me ask it this way. Do</p> <p>15 you have data to back up your opinion that the</p> <p>16 pills, quote, "took it to another level"?</p> <p>17 MS. LEYIMU: The same objection.</p> <p>18 You can answer.</p> <p>19 A. I do not have documentation that</p> <p>20 states that, but what I do have is just the</p> <p>21 interaction I've had with my people. They've</p> <p>22 seen it on a daily basis. They've seen how</p> <p>23 catastrophic that this particular issue has</p> <p>24 been on our community, and it is truly</p> <p>25 devastating. It truly is. Which is --</p>
<p style="text-align: right;">Page 263</p> <p>1 everything been done to try to stop this thing?</p> <p>2 We don't -- we have more questions than</p> <p>3 answers.</p> <p>4 Q. Okay. And -- and that's your</p> <p>5 perspective, sitting here today as -- as chief</p> <p>6 of -- chief of Akron Fire, that with respect to</p> <p>7 opiates, it's a crisis, but there's more</p> <p>8 questions than answers?</p> <p>9 MS. LEYIMU: Object to the form of</p> <p>10 the question.</p> <p>11 A. There are more questions than</p> <p>12 answers. Why are we having a wave instead of</p> <p>13 it just being consistent? We really don't</p> <p>14 know.</p> <p>15 Why did we have the big increase in</p> <p>16 2016? We think we may have some ideas, but has</p> <p>17 anyone actually said this is 100 percent the</p> <p>18 reason why?</p> <p>19 I think that's what part of this</p> <p>20 litigation is about, to try to determine</p> <p>21 exactly that. So I think those -- those types</p> <p>22 of questions are being asked as we speak, and</p> <p>23 that's, I think, why we're here today, to</p> <p>24 figure out why.</p> <p>25 Q. And you mentioned -- I wrote</p>	<p style="text-align: right;">Page 265</p> <p>1 Q. Do you --</p> <p>2 A. Which is why we have tried to come</p> <p>3 up with ideas on trying to -- how to make a</p> <p>4 difference. And that's -- you know, from those</p> <p>5 things we have the QRT. We have the ARV to try</p> <p>6 to get another unit out there.</p> <p>7 We are trying to see what can we do</p> <p>8 that is effective in doing our part to help,</p> <p>9 because it is a -- not just an Akron crisis,</p> <p>10 but this is a national crisis.</p> <p>11 Q. Now, in terms of pills, was there</p> <p>12 anything from your perspective that -- that was</p> <p>13 different in 2014 with respect to opiate pills</p> <p>14 as opposed to 1990s when you had a</p> <p>15 prescription?</p> <p>16 A. The sheer volume of calls for</p> <p>17 overdoses. And as I described when I talked</p> <p>18 about the -- the individual that was another</p> <p>19 city employee, the fact that you can do exactly</p> <p>20 what you're supposed to do, take your</p> <p>21 medication exactly as prescribed by a doctor,</p> <p>22 and through no fault of your own find yourself</p> <p>23 addicted, to me, is -- is not just horrible,</p> <p>24 but it's -- it's got to be frightening for</p> <p>25 everybody out there to know that, wow, I could</p>

<p style="text-align: right;">Page 266</p> <p>1 do nothing wrong, nothing illegal, and become 2 addicted.</p> <p>3 Q. So in terms of the overdose deaths 4 in Summit County --</p> <p>5 A. Yes.</p> <p>6 Q. -- just looking at Dr. Kohler's 7 numbers, there are roughly 300 cases where 8 cocaine, illicit street fentanyl or heroin were 9 the cause of death, and roughly 33 cases where 10 it was the pills.</p> <p>11 So when you hear 300 from illegal 12 street drugs and 33 from prescription pills, 13 does that number surprise you, based on your 14 experience on the force in 2015?</p> <p>15 MS. LEYIMU: Object to the form.</p> <p>16 A. It doesn't, and I'll tell you why. 17 I think there are a number of people that start 18 off taking their medications like I had 19 described before, exactly as it was prescribed. 20 And then they get to a point where, "Okay, I 21 can't get prescription drugs anymore," and a 22 percentage of those people will try to find 23 something else.</p> <p>24 I think this is something that will 25 get you addicted -- the opiate pills will get</p>	<p style="text-align: right;">Page 268</p> <p>1 the question.</p> <p>2 Q. Let me ask a simpler question.</p> <p>3 A. Okay.</p> <p>4 Q. If I look at the number of run 5 statistics from --</p> <p>6 A. Yes.</p> <p>7 Q. -- Akron Fire, is there any way, 8 looking at those statistics, where I could 9 identify the number of people who ever had a 10 prescription pill -- ever had a prescription 11 for an opioid pill?</p> <p>12 A. When we go out on emergency calls, 13 one of the things that we will do is ask for a 14 list of medications that people are taking. 15 And it's something that the doctors at the 16 hospital want to know. They want to know what 17 type of medications this particular individual 18 is taking.</p> <p>19 That is something that may help us 20 determine if this issue started off as a 21 pill -- opiate pill-related problem. But not 22 always, because people aren't always truthful, 23 for one. And for someone unresponsive, we may 24 never know what it was that -- that they were 25 taking and if they were on an opiate pill.</p>
<p style="text-align: right;">Page 267</p> <p>1 you addicted, and then in your flurry or in 2 your desperation to try to -- to stop yourself 3 from having the side effects of being an addict 4 that cannot any longer get that drug, they look 5 to something else.</p> <p>6 Some people may look to going 7 directly into treatment and trying to get help, 8 but a percentage of folks are going to go the 9 illegal route and start trying to use something 10 else that will try to help them get through the 11 fact that they are having these side effects 12 from the drugs.</p> <p>13 Q. Now, in terms of trying to 14 understand any individual story, and whether -- 15 whether that example you just provided, whether 16 a person that you make a run for at Akron Fire, 17 whether that overdose on cocaine is in any 18 rela- -- any way related to a history of 19 prescription pills and whether there's that 20 kind of progression of addiction that you just 21 described, how would you -- sitting here today, 22 what sources of information would you look to 23 to try to figure out that person's story, that 24 person's death?</p> <p>25 MS. LEYIMU: Object to the form of</p>	<p style="text-align: right;">Page 269</p> <p>1 Q. So tell me if this is a correct 2 understanding. For some people that Akron Fire 3 goes on runs, you'll never know whether their 4 story started with prescription pills.</p> <p>5 For others, you could look to the 6 run reports, you could look to the doctor 7 records and the hospital records after you've 8 dropped them off, and if they were forthcoming 9 and provided accurate information in response 10 to your requests, those sources of information 11 may contain medication history.</p> <p>12 A. I think it's a much more accurate 13 way of getting information from the hospitals, 14 from the county, from the health department 15 type organizations, that can give us accurate 16 information on this was a -- this was an 17 overdose of this particular chemical or this 18 particular drug or whatever. I think the Akron 19 Fire Department does not have the ability to 20 tell you, "This was OxyContin; this was 21 Vicodin."</p> <p>22 Q. Okay.</p> <p>23 A. Et cetera, et cetera.</p> <p>24 Q. All right.</p> <p>25 A. But I can tell you this, that when</p>

<p style="text-align: right;">Page 270</p> <p>1 we go out and we administer Narcan, if we get a 2 positive response, then that's typically 3 telling you that there was some type of an 4 opiate there. And that's -- this -- this is 5 what my people are coming back and relaying all 6 through the fire department, that this is what 7 we're seeing. 8 Q. You talked about kind of a 9 progression that addiction may take -- you 10 know, direction that addiction may take some 11 people in and may lead them to break the law 12 and use illegal drugs. 13 A. Yes. 14 Q. Based on your experience on the 15 force for those decades, do you agree that even 16 addicted members of society still have personal 17 responsibility for their actions? 18 MS. LEYIMU: Object to the form of 19 the question. 20 A. I believe that actually everyone 21 has personal responsibility for their actions, 22 but I believe that people who are addicted to 23 any substance basically become like slaves to 24 that substance. 25 Now, your brain may tell you to do</p>	<p style="text-align: right;">Page 272</p> <p>1 ensuring that you're able to respond to 2 opiate-related issues? 3 A. I have not specifically gone and 4 asked for an increase in manpower because of 5 the opiate issue. I've gone and asked for an 6 increase in manpower because of the totality of 7 what we're doing. It wasn't specifically just 8 for opiate -- the opiate crisis, per se. 9 It was because we are having 50,000 10 calls a year. We are beating up on our 11 personnel by having them go on an excessive 12 amount of calls. We need to increase the 13 number of people we have so we can distribute 14 some of these calls to more people, and 15 therefore, cause less stress to our people and 16 better serve the citizens of Akron. 17 Q. When have you made that request for 18 an increase in general manpower? 19 A. In writing, not at all; but 20 verbally, many times. 21 Q. Did you make a request during 2017? 22 A. Yes. 23 Q. Do you remember the number or the 24 degree of manpower that you requested an 25 increase of in 2017?</p>
<p style="text-align: right;">Page 271</p> <p>1 X, Y, Z because it's the right thing to do, but 2 your body is tell- -- is dragging you in a 3 different direction. So those people are 4 losing control of themselves. 5 And it's -- in my personal opinion, 6 it's just a horrible thing to think of, that 7 law-abiding citizens, people who want to abide 8 by the law, can take a substance that they 9 thought was perfectly fine, prescribed by their 10 doctor, take it exactly as it was prescribed, 11 and find themselves going down that slippery 12 slope to a place where, you know, common sense, 13 you know, logical thinking no longer dictates 14 what they're doing. Now the drug is in 15 control, and you will do whatever it takes to 16 get that drug because your body is telling you 17 you will do or die. 18 Q. I appreciate that. 19 MR. CARTER: Just for record 20 purposes, I'll move to strike as nonresponsive 21 everything after the second sentence. 22 BY MR. CARTER: 23 Q. Okay. With -- with respect to 24 Akron Fire's resources, have you ever asked for 25 an increase in manpower solely on the basis of</p>	<p style="text-align: right;">Page 273</p> <p>1 A. It was an increase of approximately 2 22 people compared to what our current full 3 strength is. Our current full strength is 363. 4 Q. Was that request for an additional 5 22 individuals granted? 6 A. No. 7 Q. Okay. And were you given any 8 reasons why? 9 A. Yes. 10 Q. What were you told? 11 A. Let's see. How was it phrased? 12 "Okay. So where do you want to take this money 13 from? Here's what your budget is. Where are 14 we going to find the money to do this?" 15 Q. So in response to that answer, did 16 you build in a request for additional manpower 17 in the following budget cycle? 18 MS. LEYIMU: Object to the form of 19 the question. 20 Q. Do you understand my question? 21 A. I think so. Did we not try to ask 22 for it in the budget for the next following 23 year. 24 Q. Right. Because if you were told 25 this is your budget, you're limited, you got to</p>

<p style="text-align: right;">Page 274</p> <p>1 find it from somewhere. So then the next time 2 you had a chance to change the budget, did you 3 ask that additional manpower be put into that 4 new budget? 5 A. With the following year's budget 6 discussions, I was told that, "This is your 7 number again. This is your" -- 8 You don't get to ask for, "Oh, can 9 I have a budget of 75 million?" 10 It's, "No. This is what your 11 budget is." 12 Q. After the request for 22 additional 13 personnel was declined, did you make any other 14 specific number requests? 15 A. Actually, I made a request in 2018 16 to hire an additional 20 people this year just 17 to maintain the numbers we have for folks that 18 retire. 19 Q. And what was the response to that? 20 A. "How are you going to pay for it? 21 Show me in your budget where you're going to 22 budget this." 23 Q. When you received that kind of 24 pay-as-you-go response, did you have a -- how 25 did you respond to that? Did you find places</p>	<p style="text-align: right;">Page 276</p> <p>1 service specifically in response to opiate 2 issues? 3 MS. LEYIMU: Objection to form. 4 Asked and answered. 5 A. They're to respond to all types of 6 emergencies, not just opiate calls. 7 Q. Okay. So let me ask it this way. 8 Have you made any request for vehicles or 9 supplies solely in response to opiate issues? 10 MS. LEYIMU: Object to the form of 11 the question. 12 A. The QRT vehicle is solely in 13 response to the opiate issue. The ARV unit was 14 not termed and phrased to say it's just an 15 opiate response. It was we're having so many 16 calls that we're running out of units, and 17 let's see if we can put another type of a unit, 18 something that's different, out there to try to 19 help us get through the peak times. 20 And those were greatly related to 21 the opiate crisis. But did we say specifically 22 it's just for opiates? No. Because -- and 23 I'll give you an example. 24 On any given day, we might not have 25 an opiate overdose, but we might have two</p>
<p style="text-align: right;">Page 275</p> <p>1 in the budget where you had priorities you 2 could shift? 3 A. There are no places where we can 4 shift priorities, because everything we do is 5 important. 6 Things that were not important in 7 our budget we had gotten rid of a long time ago 8 as the budget crunch from way back in 2008 or 9 so happened. Every department had to 10 consolidate and absolutely do what's necessary. 11 Q. I asked about personnel. Have you 12 ever requested equipment, you know, additional 13 trucks, additional vehicles, any -- any 14 equipment specifically related to dealing with 15 opiate issues? 16 A. The vehicle that we use for the -- 17 the -- the ARV, the vehicle we use for the QRT. 18 We've talked about trying to get newer med 19 units to help replace the ones that are 20 breaking down frequently so that we can, again, 21 continue our -- our level of service to the 22 community. So it's on a -- an annual basis. 23 All the time. 24 Q. Those vehicles that you just 25 mentioned, were those requested and put into</p>	<p style="text-align: right;">Page 277</p> <p>1 fires, we may have three heart attacks, and we 2 may have three MVAs at once, so that unit's not 3 going to be just reserved for opiate use. It's 4 for when we need it, regardless of what type of 5 an emergency. 6 To the Akron Fire Department, we 7 are, again, first-line response, and our job is 8 to go out and save lives regardless of what the 9 type of an emergency is. So an opiate overdose 10 is only one type of an emergency that we go on, 11 so all of our units may go out on different 12 types of calls depending on what we need at 13 that time. 14 Q. When you made requests for 15 additional head count, whether it was the 22 16 the one year or the 20, and those were denied, 17 from your perspective as the leader of Akron 18 Fire, did those -- did the -- did the rejection 19 of those requests, from your perspective, 20 imperil your ability to safeguard the city of 21 Akron? 22 MS. LEYIMU: Object to the form of 23 the question. 24 Q. Let me ask it in a simpler way. 25 A. Okay.</p>

<p style="text-align: right;">Page 278</p> <p>1 Q. When those requests were denied, 2 did you still think you could do your job? 3 A. Well, I'll -- I'll phrase it like 4 this. The Akron Fire Department and every fire 5 department I have had contact with in this 6 country has taken whatever it is we can get and 7 do the best we can with it. 8 So in some instances we may only -- 9 you know, you may only have three med units to 10 cover an area of our size. And I'll give you 11 an example. Cleveland, East Cleveland, some of 12 those areas, they don't have as good of a 13 coverage as we do currently, but they do the 14 best they can with what they have. Does it 15 impede you? Does it stop you from doing what 16 you need to do? That's subjective, in my 17 personal opinion, because when you respond to a 18 call, you do what you need to do for that call 19 and then you get back in service and now you're 20 ready to go to another emergency. Does that 21 take three med units? Does that take five med 22 units? Depends on the day. 23 Today, right now at 4:30, we may 24 only need three ambulances out there on the 25 street responding to calls, helping people.</p>	<p style="text-align: right;">Page 280</p> <p>1 Q. Have you ever had to raise that 2 specific concern to the deputy mayor, to say, 3 "We're at" -- "We're at a critical breaking 4 point. We're doing the best we can, but" -- 5 "but this is not enough. We need to find a 6 budget solution"? 7 MS. LEYIMU: Object to the form. 8 A. What I have said was we're running 9 out of units more frequently. We're running 10 out of units a couple of times a week versus a 11 couple of times a month versus once or twice a 12 year. So the increase volume of calls has put 13 us to where we are in danger of not being able 14 to meet our mission. 15 But the fire service in general -- 16 not just here in Akron, but everywhere across 17 the country -- usually we have mutual aid 18 agreements and auto aid agreements with our 19 surrounding communities just in case these 20 types of things happen to do the absolute best 21 job we can in providing the needed services to 22 our community. We think it was our -- our 23 responsibility to make sure we had those 24 agreements in place. 25 The problem is Cuyahoga Falls may</p>
<p style="text-align: right;">Page 279</p> <p>1 But at 6:30, two hours from now, there may be 2 14 units out, all of them out at once on 3 different calls. 4 So it's -- it's very hard to say we 5 need exactly this many units to do our job. We 6 have what we have to do the best we can. We 7 did an estimation of what it takes to respond 8 to emergencies in this community, and those are 9 the units that we have put in service, and we 10 have had to deal with the increase, the uptick 11 in calls that started around 2014 and seemed to 12 peak in 2016. 13 Q. And I -- I appreciate that you get 14 the job done with what's available to you. 15 A. Yes. 16 Q. If there was a point where you, as 17 head of Akron Fire, thought that despite 18 everyone on the force's best efforts, that 19 there was a real risk to the city, and that 20 with everyone going 100 percent it's still -- 21 you know, there was a danger, would you raise 22 that concern to the deputy mayor? 23 A. Absolutely. 24 MS. LEYIMU: Object to the form of 25 the question.</p>	<p style="text-align: right;">Page 281</p> <p>1 be having their own set of emergencies, so they 2 have an increase in calls as well. Fairlawn 3 may -- is also experiencing an increase in 4 calls. So even though you have agreements with 5 these other communities, sometimes they can 6 help you, and there -- there are points, 7 though, when they may not be able to reach out 8 and help you in a timely manner to get there 9 and help our -- our people that are having an 10 emergency. 11 Is that -- is that a fair answer? 12 Q. Yeah. Fair to say that in your 13 line of work there are a variety of situations 14 where you could be called into service? 15 A. True. 16 Q. And in terms of your ability to 17 provide those services, it's multifactorial, 18 and there are multiple variables, including the 19 types of runs, the degree of the emergency, 20 what's going on in the surrounding communities, 21 whether they're being pressed into service at 22 the same time. It's a different flavor of 23 variables every day that -- that impacts that 24 calculus in terms of whether you're going to 25 have enough resources on any particular day.</p>

<p style="text-align: right;">Page 282</p> <p>1 Is that fair?</p> <p>2 A. That's fair.</p> <p>3 Q. Okay. During your tenure as leader</p> <p>4 of Akron Fire Department, do you think that the</p> <p>5 department has done a good job?</p> <p>6 A. Oh, absolutely.</p> <p>7 Q. What -- I know it may be an</p> <p>8 immodest question, but how would you grade</p> <p>9 yourself as the Chief of Akron Fire?</p> <p>10 MS. LEYIMU: Object to the form of</p> <p>11 the question.</p> <p>12 A. That's an interesting question.</p> <p>13 How would I grade myself as the leader of Akron</p> <p>14 Fire?</p> <p>15 I'll start off by saying it's much</p> <p>16 easier to say how I think the fire department</p> <p>17 is doing. The men and women of the Akron Fire</p> <p>18 Department do an exceptional job going out</p> <p>19 there and trying to meet the needs of our</p> <p>20 community in multifaceted ways. They do an</p> <p>21 outstanding job. I am truly proud of the men</p> <p>22 and women of this organization for the job that</p> <p>23 they do, for the oath that they have taken to</p> <p>24 go out and try to help and save the people in</p> <p>25 our -- in our community as they have</p>	<p style="text-align: right;">Page 284</p> <p>1 Q. Sure. Under your tenure, has the</p> <p>2 Akron Fire Department had the ability to</p> <p>3 respond -- well, strike that.</p> <p>4 Has the Akron Fire Department, in</p> <p>5 fact, responded as quickly and intensively as</p> <p>6 it could during your tender -- tenure?</p> <p>7 A. I think that's a very complicated</p> <p>8 question. Our goal is to reach every emergency</p> <p>9 in less than four minutes. So the -- the</p> <p>10 different fire stations and resources are</p> <p>11 situated around Akron to try to help us achieve</p> <p>12 that goal. But there are many things that can</p> <p>13 happen that can cause that to not be something</p> <p>14 that's attainable. Weather, the snow like</p> <p>15 today, is one. Something like if you have an</p> <p>16 emergency at location A and the closest med</p> <p>17 unit responds to that emergency, but two blocks</p> <p>18 away, in that same neighborhood there's another</p> <p>19 emergency. Now that same type of resource,</p> <p>20 that ambulance or fire truck or whatever it is,</p> <p>21 is now coming from the next closest station</p> <p>22 responding, so there's a delayed response.</p> <p>23 And so we do things like trying to</p> <p>24 send any other units that might have been at</p> <p>25 that station close to incident A first, to try</p>
<p style="text-align: right;">Page 283</p> <p>1 emergencies.</p> <p>2 When it comes to me personally, I</p> <p>3 think that I have tried to think outside the</p> <p>4 box and not use traditional thinking to manage</p> <p>5 this organization, and I think that's something</p> <p>6 that was desperately needed. And would I give</p> <p>7 myself an A or a B, I can't really tell you</p> <p>8 that.</p> <p>9 But I can tell you this. I think</p> <p>10 about how we do this job every day; if there</p> <p>11 are ways we can improve it every day; if my</p> <p>12 people are safe, I think about that every day.</p> <p>13 And this is a 24/7, 365-day-a-year job where</p> <p>14 there's never a time that I am not concerned</p> <p>15 about my people and their safety and how</p> <p>16 they're doing the job and serving our citizens.</p> <p>17 I'll put it for you like this. My</p> <p>18 wife says that I have a mistress, and that</p> <p>19 mistress is the Akron Fire Department.</p> <p>20 Q. Okay. Under your tenure, has the</p> <p>21 Akron Fire Department been able to respond as</p> <p>22 quickly and as intensively as it could with</p> <p>23 respect to all of its responsibilities?</p> <p>24 A. Repeat the -- please repeat that</p> <p>25 question.</p>	<p style="text-align: right;">Page 285</p> <p>1 to get there until we can get that other</p> <p>2 resource there. We do things of that sort all</p> <p>3 the time to try to get the best help we can for</p> <p>4 our citizens, to our citizens, in those</p> <p>5 emergencies.</p> <p>6 Q. Let me --</p> <p>7 A. Does that make sense?</p> <p>8 Q. Let me ask it this way. If you had</p> <p>9 to grade the performance of your force --</p> <p>10 A. Yes.</p> <p>11 Q. -- how would you -- what grade</p> <p>12 would you give them?</p> <p>13 A. A, without a doubt.</p> <p>14 Q. Okay. In your leadership, have you</p> <p>15 had any ideas specifically related to</p> <p>16 addressing opiate issues that you have not been</p> <p>17 able to implement?</p> <p>18 A. Repeat the question, please.</p> <p>19 Q. Yes. During your leadership, have</p> <p>20 you had any ideas specifically related to</p> <p>21 addressing opiate issues that you have not been</p> <p>22 able to implement?</p> <p>23 A. I have a number of ideas that I</p> <p>24 have not been able to implement because we</p> <p>25 could not simply afford to do those things.</p>

<p style="text-align: right;">Page 286</p> <p>1 One of them is adding the additional people.</p> <p>2 Q. Okay. For all of those ideas that</p> <p>3 you have not been able to implement, have you</p> <p>4 raised them with the deputy mayor's office or</p> <p>5 the appropriate budget authorities?</p> <p>6 MS. LEYIMU: Object to the form of</p> <p>7 the question. Asked and answered.</p> <p>8 A. I have.</p> <p>9 Q. Okay. Other than the personnel</p> <p>10 issue that you cited, are there any other</p> <p>11 specific ideas you've wanted to implement</p> <p>12 but -- and that you've raised and have been</p> <p>13 rejected in the area of opiates?</p> <p>14 A. Opiate-specific?</p> <p>15 Q. Yes.</p> <p>16 A. No, not that I can think of.</p> <p>17 Q. And just to be clear, the personnel</p> <p>18 requests that you made, I think you told me</p> <p>19 earlier those were not opiate-specific; those</p> <p>20 were general force requests, correct?</p> <p>21 A. Yes.</p> <p>22 MS. LEYIMU: Object to the form of</p> <p>23 the question.</p> <p>24 Q. Okay.</p> <p>25 A. But that includes --</p>	<p style="text-align: right;">Page 288</p> <p>1 right?</p> <p>2 A. Yes.</p> <p>3 Q. Okay. The second to last -- third</p> <p>4 to last sentence, Mr. -- Chief O'Neal writes to</p> <p>5 Chief Twigg was, quote, "I just think if we're</p> <p>6 going to continue to battle the drug/overdose</p> <p>7 problem, we need to drop the opioid title on</p> <p>8 everything and make it inclusive of other drug</p> <p>9 options."</p> <p>10 Did I read that correctly?</p> <p>11 A. You read it correctly.</p> <p>12 Q. And earlier in the e-mail, he talks</p> <p>13 about methamphetamine, and methamphetamine</p> <p>14 coming in from Mexico. Do you generally see</p> <p>15 that?</p> <p>16 A. Do we see it?</p> <p>17 Q. Do you see that in the e-mail?</p> <p>18 A. I see it in the e-mail.</p> <p>19 Q. Okay. So my question to you is,</p> <p>20 did Chief O'Neal or Chief Twigg ever raise that</p> <p>21 proposal or sentiment to you, that the force</p> <p>22 ought to drop the opioid title to make it more</p> <p>23 inclusive of the drug overdose issues that</p> <p>24 Akron is facing?</p> <p>25 A. No.</p>
<p style="text-align: right;">Page 287</p> <p>1 Q. Everything you do.</p> <p>2 A. -- the opiate -- that's everything</p> <p>3 we do --</p> <p>4 Q. Okay.</p> <p>5 A. -- including opiate response.</p> <p>6 Q. All right. Two more quick things</p> <p>7 and then I'm done.</p> <p>8 MR. CARTER: We'll mark, I think,</p> <p>9 Exhibit 13, this document.</p> <p>10 - - - - -</p> <p>11 (Thereupon, Deposition Exhibit 13,</p> <p>12 3/4/2018 E-Mail from David O'Neal to</p> <p>13 Charles Twigg Re: Meth,</p> <p>14 AKRON_000246625, was marked for</p> <p>15 purposes of identification.)</p> <p>16 - - - - -</p> <p>17 Q. What I've marked as Exhibit 13 is</p> <p>18 an e-mail between David O'Neal and Charles</p> <p>19 Twigg.</p> <p>20 A. Okay.</p> <p>21 Okay.</p> <p>22 Q. Now, I understand you're not on</p> <p>23 this e-mail. I just want to use it as a</p> <p>24 jumping off point.</p> <p>25 You've had a chance to read it,</p>	<p style="text-align: right;">Page 289</p> <p>1 Q. Okay. And so I understand they</p> <p>2 didn't raise that with you. Do you personally</p> <p>3 agree with that sentiment?</p> <p>4 A. I do not.</p> <p>5 Q. Okay. And why not?</p> <p>6 A. In the -- in the management of the</p> <p>7 fire department, I have tasked my division</p> <p>8 managers, which are the district chiefs, and</p> <p>9 Chief O'Neal is one of them, to again try to</p> <p>10 think outside the box. I know how we have</p> <p>11 always done things. I know how, you know,</p> <p>12 some -- there are some tasks that we do now</p> <p>13 today that were the same that we did back in</p> <p>14 1900, and there are other things that we just</p> <p>15 implemented a few months ago that have changed.</p> <p>16 We are not stuck in the past of how we do</p> <p>17 things, but, again, try to figure out if what</p> <p>18 we are doing is the best method.</p> <p>19 And so what I see Chief O'Neal</p> <p>20 doing here is, again, brainstorming. It</p> <p>21 doesn't -- I don't agree with -- with this</p> <p>22 idea, but, obviously, this is an idea that he</p> <p>23 had.</p> <p>24 First of all, as -- because</p> <p>25 District Chief O'Neal is now currently in</p>

<p style="text-align: right;">Page 290</p> <p>1 charge of special operations and has been for a 2 couple of years, and so he is not actively 3 involved in the EMS system as we speak, just 4 like I wasn't back in 2011 and in that time 5 frame. But he is trying to look at different 6 issues and trying to think outside the box. 7 One thing that he does have a huge 8 responsibility in is in methamphetamine 9 response for -- for our department. Because of 10 the chemicals involved in making meth, he -- 11 that does fall into his realm of responsibility 12 for our hazmat response team, is to go and deal 13 with the chemicals, along with our police 14 department. 15 But in this instance, he is 16 brainstorming. And I think this is -- what? 17 It's 5:27 a.m. He's not even at work yet. So 18 he's brainstorming, trying to think out the 19 box. And personally I don't agree, but it was 20 his opinion and he shared it with Chief Twigg. 21 Q. If the number of cases related to 22 non-opioids, you know, cocaine, meth, you know, 23 if that's something that results in 24 triple-digit deaths in Akron in 2017, and I 25 know the 2018 numbers aren't final, do you</p>	<p style="text-align: right;">Page 292</p> <p>1 specific Defendant? 2 A. By any specific Defendant? 3 Q. Yes. 4 A. No, because I don't know where the 5 drugs came from. 6 Q. Okay. 7 A. I don't know who manufactured what. 8 MR. CARTER: I don't have any 9 further questions for you. Thank you, sir. 10 THE WITNESS: Thank you. 11 THE VIDEOGRAPHER: Off the record, 12 4:45. 13 (A recess was taken.) 14 THE VIDEOGRAPHER: We're back on 15 the record, 4:59. 16 EXAMINATION OF CLARENCE I. TUCKER 17 BY MR. O'CONNOR: 18 Q. Chief Tucker, we've met earlier 19 today. My name is Andrew O'Connor, and I 20 represent one of the manufacturers in the case. 21 I -- I promise to be very quick here. 22 We'll keep to the same ground rules 23 as -- as my co-counsel have discussed. If you 24 don't understand a question, just -- just let 25 me know.</p>
<p style="text-align: right;">Page 291</p> <p>1 think that it's important that the label of the 2 drug problem be accurate to reflect the 3 specific substances that are causing the death? 4 MS. LEYIMU: Object to the form. 5 Calls for speculation. 6 A. If you don't mind, I'd like to 7 rephrase it. 8 Q. Okay. 9 A. I think that when we could identify 10 what type of drug was used in an overdose, we 11 need to label it what it is. Does that mean 12 dropping the opiate label? I don't know where 13 he's coming from with that idea. But I think 14 you need to call -- basically make as many 15 accurate estimations of what happened to 16 individual calls as -- as possible. 17 So should -- I don't believe that 18 we should call something that is a meth 19 overdose an opiate overdose because that would 20 be an inaccuracy. I think we need to be as 21 accurate as possible. 22 Q. Okay. Sitting here today, are you 23 able to identify any specific overdose in Akron 24 that was caused by prescription pills 25 manufactured, distributed, or sold by any</p>	<p style="text-align: right;">Page 293</p> <p>1 A. Okay. 2 Q. I'd like you to look at again 3 Exhibit 9. Do you recall looking at this 4 document earlier today? 5 A. Yes, we talked about it earlier. 6 Q. Who prepared the attachment? 7 A. My administrative assistant, 8 Amanda. 9 Q. Okay. What was the purpose of the 10 document? 11 A. The purpose of this document was to 12 speak before cabinet about our budget for 2017. 13 Q. Okay. As you sit here today, do 14 you have any reason to doubt the accuracy of 15 the information in this document? 16 A. I do not. 17 Q. Okay. Fair to say in -- in general 18 you try to be accurate when speaking with -- to 19 the mayor and the city council? 20 A. We do. 21 Q. Okay. I just have a question about 22 the fourth bullet point, where it says 1,293 OD 23 saves. What -- what does OD saves refer to? 24 A. Overdose. 25 Q. Okay. Would that be overdose on</p>

<p style="text-align: right;">Page 294</p> <p>1 all drugs combined?</p> <p>2 A. Honestly, I'm not sure.</p> <p>3 Q. Okay. Can you say whether that</p> <p>4 1,293 OD saves includes any drugs other than</p> <p>5 opioids?</p> <p>6 MS. LEYIMU: Object to the form.</p> <p>7 Asked and answered.</p> <p>8 A. Again, I'm not sure of what all is</p> <p>9 included in when it says overdose saves.</p> <p>10 Q. Uh-huh.</p> <p>11 A. Trying to think back on this</p> <p>12 particular document. Again, I'm not sure if</p> <p>13 it's all inclusive or not.</p> <p>14 Q. Okay. As you sit here today, do</p> <p>15 you know what percentage of overdoses involve</p> <p>16 opioids in the City of Akron?</p> <p>17 MS. LEYIMU: Object to the form.</p> <p>18 Asked and answered.</p> <p>19 A. No. I would refer that question to</p> <p>20 District Chief Natko.</p> <p>21 Q. Okay. And of the overdoses that</p> <p>22 occur in Akron, do you have any idea how many</p> <p>23 involve prescription opioid pills?</p> <p>24 MS. LEYIMU: Object to the form.</p> <p>25 Asked and answered.</p>	<p style="text-align: right;">Page 296</p> <p>1 Do you know what percentage of</p> <p>2 people who abuse opioids begin their addiction</p> <p>3 with a legitimate prescription from a doctor?</p> <p>4 MS. LEYIMU: Object to the form of</p> <p>5 the question.</p> <p>6 A. I do not know those numbers, no.</p> <p>7 Q. Okay. What information would you</p> <p>8 want to have to determine those numbers?</p> <p>9 A. It is a question that if I needed</p> <p>10 to know that answer, I would simply pose the</p> <p>11 question to District Chief Natko and let him go</p> <p>12 and see if he was able to obtain that</p> <p>13 information for me.</p> <p>14 Q. Okay.</p> <p>15 A. I wouldn't tell him where to get</p> <p>16 it.</p> <p>17 Q. As far as you know, is any of that</p> <p>18 information available to the City of Akron?</p> <p>19 MS. LEYIMU: Object to the form of</p> <p>20 the question. Calls for speculation.</p> <p>21 A. I don't know.</p> <p>22 Q. Okay. Going back to the document,</p> <p>23 it says "2016," just below the second bullet.</p> <p>24 Do you see that there?</p> <p>25 A. Yes.</p>
<p style="text-align: right;">Page 295</p> <p>1 A. I do not have that information.</p> <p>2 Q. Okay. Do you have any data within</p> <p>3 the Akron Fire Department that would allow you</p> <p>4 to determine that percentage?</p> <p>5 A. It's something I would request of</p> <p>6 District Chief Natko, and whether he actually</p> <p>7 has some -- some information or whether he</p> <p>8 would refer to hospitals or the health</p> <p>9 department or people of that sort, I'm not sure</p> <p>10 where he would gather that information. So I</p> <p>11 don't know if there's data that we have</p> <p>12 personally.</p> <p>13 Q. Okay. So fair to say as far as you</p> <p>14 know, based on the information available to the</p> <p>15 Akron Fire Department, you're unable to say</p> <p>16 what percentage of overdoses are due to</p> <p>17 prescription opioid pills?</p> <p>18 A. That is --</p> <p>19 MS. LEYIMU: Object to the form of</p> <p>20 the question.</p> <p>21 A. That is correct.</p> <p>22 Q. Okay. Chief Tucker, you've talked</p> <p>23 a few times today about the situation where</p> <p>24 a -- a person is prescribed opioids and -- and</p> <p>25 later becomes addicted.</p>	<p style="text-align: right;">Page 297</p> <p>1 Q. Is your understanding that that</p> <p>2 2016 refers to the numbers that follow</p> <p>3 regarding the number of incidents, EMS runs,</p> <p>4 and OD saves?</p> <p>5 A. Yes.</p> <p>6 Q. Okay. And am I -- am I correct</p> <p>7 that 2016 was the peak of opioid overdoses in</p> <p>8 Akron?</p> <p>9 A. I believe so, yes.</p> <p>10 Q. Okay. Earlier today you were asked</p> <p>11 whether you recognize the names of a number of</p> <p>12 Defendants in this case, and that list of names</p> <p>13 included a number of manufacturers.</p> <p>14 You didn't remember them at -- at</p> <p>15 the time. Have -- have -- have any names of</p> <p>16 manufacturers listed as Defendants become</p> <p>17 familiar to you since you were asked the</p> <p>18 question earlier today?</p> <p>19 A. No.</p> <p>20 Q. Okay. Have you seen any marketing</p> <p>21 materials produced by any of the Manufacturing</p> <p>22 Defendants in this case?</p> <p>23 A. I have not.</p> <p>24 Q. Do you have --</p> <p>25 A. Not to my knowledge.</p>

<p style="text-align: right;">Page 298</p> <p>1 Q. Do you have any knowledge of any 2 marketing messages communicated by any 3 Manufacturing Defendants in this case to 4 anyone? 5 A. Are you talking about specifically 6 to the opiate crisis, or are you talking about 7 in general, marketing information? 8 Q. I'm talking about specific to 9 opioid products. Are you familiar with -- let 10 me ask the question again. 11 Are you familiar with any marketing 12 messages specific to opioid products that were 13 distributed or delivered by any Manufacturing 14 Defendant in this case? 15 A. No. 16 Q. Earlier you mentioned that one of 17 the things the City had -- had done to try to 18 address the problem of -- of opioid abuse was 19 distribute packets or pouches to dispose of 20 unnecessary medication. Do you recall that 21 topic? 22 A. Repeat your question, please. 23 Q. Sure. Earlier today I think you 24 were asked a question about drug disposal 25 pouches --</p>	<p style="text-align: right;">Page 300</p> <p>1 MS. LEYIMU: Object to the form of 2 the question. 3 A. I believe that that may be a 4 concern -- 5 Q. Uh-huh. 6 A. -- but in this case for the 7 pouches, for the either expired drugs or drugs 8 that were no longer needed -- 9 Q. Uh-huh. 10 A. -- it was more in -- in -- along 11 the line, again, as to not have them land in 12 our landfills, being buried into the earth; 13 actually, to have them disposed of properly. 14 We don't want them going down into the sewers. 15 Q. Okay. Just one last topic. 16 At the very beginning of today, you 17 talked a little bit about your -- your inbox 18 and your e-mail. 19 Am I correct that you have some 20 folders within your inbox in which you store 21 certain categories of e-mails? 22 A. That is correct. 23 Q. Okay. Can you give us, for 24 example, some of those folders? 25 MS. LEYIMU: Object to the form.</p>
<p style="text-align: right;">Page 299</p> <p>1 A. Yes. 2 Q. -- that were used to dispose of 3 unneeded medication. 4 A. Yes. 5 Q. Do you remember that? 6 In your experience, are those drug 7 disposal pouches something that's helpful in 8 the effort to curb misuse of opioids? 9 MS. LEYIMU: Object to the form of 10 the question. 11 A. It was not a specific effort to 12 reduce opiate abuse. 13 Q. Uh-huh. 14 A. It was a specific effort to not 15 have different medications end up in the trash, 16 end up in our trash sites where they're -- 17 they're at a landfill or whatever. 18 Q. Uh-huh. 19 A. It was an effort to get those 20 different medications that may not be used any 21 longer disposed of appropriately. 22 Q. Okay. And was one of the reasons 23 for wanting them to be disposed of 24 appropriately so that they didn't fall into the 25 wrong hands?</p>	<p style="text-align: right;">Page 301</p> <p>1 A. Just trying to go by memory. 2 There's a folder that says "fire chief." 3 There's a folder that says -- 4 titled "incidents," and it's basically for, 5 like, serious incidents where people were 6 injured or -- or died. 7 Q. Uh-huh. 8 A. There's a folder that -- let's 9 see -- is labeled "pay-in," where the different 10 types of payments that came back to the City 11 that I have approved and saved in that box. 12 Again, there are more, but that's 13 the general idea as to what's there. 14 Q. Okay. And would -- would any 15 e-mails related to opioids have been filed into 16 any of those folders? 17 MS. LEYIMU: Object to the form of 18 the question. 19 A. There is one box where I have put 20 the -- the daily reports that I receive from 21 the County -- 22 Q. Uh-huh. 23 A. -- for overdoses. There's one, I 24 think, that's actually labeled "OD." So the 25 daily reports go there.</p>

<p style="text-align: right;">Page 302</p> <p>1 Q. And the folder labeled "OD" is the</p> <p>2 one that the reports from the -- I believe that</p> <p>3 you said the County --</p> <p>4 A. Yes.</p> <p>5 Q. -- are filed into? Okay.</p> <p>6 Are there any other folders that</p> <p>7 would contain e-mails or other documents</p> <p>8 related to opioids?</p> <p>9 A. Well, in my inbox, when it gets too</p> <p>10 full --</p> <p>11 Q. Uh-huh.</p> <p>12 A. -- I may archive that information</p> <p>13 so that it's not still in my inbox.</p> <p>14 Q. Okay.</p> <p>15 A. And so I'm sure there are some</p> <p>16 e-mails there. But again, all of that</p> <p>17 information would have been provided to our</p> <p>18 attorneys -- to my attorneys.</p> <p>19 Q. Okay.</p> <p>20 A. Also, the City's e-mail system is</p> <p>21 on a server such that even if you delete it on</p> <p>22 purpose or accidentally deleted something, it's</p> <p>23 still attainable --</p> <p>24 Q. Okay.</p> <p>25 A. -- it's still in the server, and</p>	<p style="text-align: right;">Page 304</p> <p>1 Asked and answered.</p> <p>2 A. I'm not really sure, to be</p> <p>3 perfectly honest. I'm not sure.</p> <p>4 Q. Okay.</p> <p>5 A. It's like saying how many times</p> <p>6 have you ran versus walked in your lifetime.</p> <p>7 Q. Okay. No, I understand.</p> <p>8 A. I don't know.</p> <p>9 Q. I was just thinking you testified</p> <p>10 earlier that you got 80 to 100 e-mails a day.</p> <p>11 A. 80 to 100, correct.</p> <p>12 Q. About how many would you say were</p> <p>13 about opioids?</p> <p>14 MS. LEYIMU: Object to the form of</p> <p>15 the question. Vague.</p> <p>16 A. On some days multiple. On some</p> <p>17 days absolutely none. And again, it all</p> <p>18 depends.</p> <p>19 Q. Okay. So over the course of two</p> <p>20 years, roughly, as Chief, and more, isn't it</p> <p>21 fair to say that there's at least in the</p> <p>22 hundreds of -- of e-mails that you've had on</p> <p>23 opioids?</p> <p>24 MS. LEYIMU: Object to the form of</p> <p>25 the question. Asked and answered several</p>
<p style="text-align: right;">Page 303</p> <p>1 it's still something that's been accessible to</p> <p>2 our attorneys.</p> <p>3 Q. Okay. Over the course of your</p> <p>4 career, roughly how many e-mails would you say</p> <p>5 you received related to opioids?</p> <p>6 MS. LEYIMU: Object to the form of</p> <p>7 the question. Calls for speculation.</p> <p>8 A. I honestly have no idea.</p> <p>9 Q. I'm just looking for your best</p> <p>10 guess. Are we talking 10 or 100 or 1,000?</p> <p>11 MS. LEYIMU: Object to the form.</p> <p>12 A. How many e-mails in my career --</p> <p>13 Q. Yeah.</p> <p>14 A. -- I received?</p> <p>15 Q. Fair to say -- related to opioids.</p> <p>16 Fair to say more than 1,000?</p> <p>17 MS. LEYIMU: Object to the form of</p> <p>18 the question.</p> <p>19 A. I honestly don't know.</p> <p>20 Q. Okay.</p> <p>21 A. It would be a -- that's a wild</p> <p>22 guess in the air.</p> <p>23 Q. Okay. Certainly in the hundreds,</p> <p>24 though, on an issue of this importance?</p> <p>25 MS. LEYIMU: Object to the form.</p>	<p style="text-align: right;">Page 305</p> <p>1 times.</p> <p>2 A. I think that's just a guess.</p> <p>3 MR. O'CONNOR: It's been asked, it</p> <p>4 hasn't been answered.</p> <p>5 A. I think it's a guess. Again, I'm</p> <p>6 not sure.</p> <p>7 Q. Okay.</p> <p>8 A. That's a wild guess.</p> <p>9 Q. All right.</p> <p>10 A. As -- I'm just curious, our</p> <p>11 attorneys have access to our e-mail system, and</p> <p>12 I assume that information was shared with you.</p> <p>13 Q. Well, some information was shared,</p> <p>14 but not very many e-mails.</p> <p>15 A. Okay.</p> <p>16 Q. And so I guess my -- I would assume</p> <p>17 that given an issue of this importance, there</p> <p>18 would have been substantial e-mail</p> <p>19 correspondence --</p> <p>20 A. Okay.</p> <p>21 Q. -- about it?</p> <p>22 A. Okay.</p> <p>23 Q. Is that a fair assumption?</p> <p>24 MS. LEYIMU: Object to the form.</p> <p>25 A. It was an important enough topic to</p>

<p style="text-align: right;">Page 306</p> <p>1 where it was discussed -- or there was e-mail 2 on it multiple times, but as to saying exactly 3 how many or approximately how many, I'm not 4 sure. 5 MR. O'CONNOR: Okay. Thanks. 6 That's all I have. 7 THE WITNESS: Okay. 8 MR. O'CONNOR: Thank you for your 9 time today. 10 THE WITNESS: Thank you. 11 THE VIDEOGRAPHER: Off the record, 12 5:15. 13 (A recess was taken.) 14 (End of video record. Counsel 15 agreed the following appear only on 16 the stenographic record.) 17 MR. LANNIN: The Defendants have no 18 further questions. 19 MS. LEYIMU: And neither do the 20 Plaintiffs. 21 MR. LANNIN: Off the record. 22 (Deposition concluded at 5:19 p.m.) 23 ~ ~ ~ ~ ~ 24 25</p>	<p style="text-align: right;">Page 308</p> <p>1 REPORTER'S CERTIFICATE 2 The State of Ohio,) 3 SS: 4 County of Cuyahoga.) 5 6 I, Stephen J. DeBacco, a Notary 7 Public within and for the State of Ohio, duly 8 commissioned and qualified, do hereby certify 9 that the within named witness, CLARENCE I. 10 TUCKER, was by me first duly sworn to testify 11 the truth, the whole truth and nothing but the 12 truth in the cause aforesaid; that the 13 testimony then given by the above-referenced 14 witness was by me reduced to stenotypy in the 15 presence of said witness; afterwards 16 transcribed, and that the foregoing is a true 17 and correct transcription of the testimony so 18 given by the above-referenced witness. 19 I do further certify that this 20 deposition was taken at the time and place in 21 the foregoing caption specified and was 22 completed without adjournment. 23 24 25</p>
<p style="text-align: right;">Page 307</p> <p>1 Whereupon, counsel was requested to give 2 instructions regarding the witness's review of 3 the transcript pursuant to the Civil Rules. 4 5 SIGNATURE: 6 Transcript review was requested pursuant to the 7 applicable Rules of Civil Procedure. 8 9 TRANSCRIPT DELIVERY: 10 Counsel was requested to give instructions 11 regarding delivery date of transcript. 12 13 14 15 16 17 18 19 20 21 22 23 24 25</p>	<p style="text-align: right;">Page 309</p> <p>1 I do further certify that I am not 2 a relative, counsel or attorney for either 3 party, or otherwise interested in the event of 4 this action. 5 IN WITNESS WHEREOF, I have hereunto 6 set my hand and affixed my seal of office at 7 Cleveland, Ohio, on this 15th day of 8 January, 2019. 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25</p> <p style="text-align: center;"><i>Stephen J. DeBacco</i></p> <p>Stephen J. DeBacco, Notary Public within and for the State of Ohio</p> <p>My commission expires September 30, 2022.</p>

<p style="text-align: right;">Page 310</p> <p>1 Veritext Legal Solutions 1100 Superior Ave 2 Suite 1820 3 Cleveland, Ohio 44114 4 Phone: 216-523-1313 5 6 January 15, 2019 7 8 To: Jodi Flowers, Esq. 9 10 Case Name: In Re: National Prescription Opiate Litigation 11 12 Veritext Reference Number: 3182083 13 14 Witness: Clarence I. Tucker Deposition Date: 1/10/2019 15 16 Dear Sir/Madam: 17 18 Enclosed please find a deposition transcript. Please have the witness 19 review the transcript and note any changes or corrections on the 20 included errata sheet, indicating the page, line number, change, and 21 the reason for the change. Have the witness' signature notarized and 22 forward the completed page(s) back to us at the Production address 23 shown 24 above, or email to production-midwest@veritext.com. 25 If the errata is not returned within thirty days of your receipt of this letter, the reading and signing will be deemed waived. Sincerely, Production Department NO NOTARY REQUIRED IN CA</p>	<p style="text-align: right;">Page 312</p> <p>1 DEPOSITION REVIEW 2 CERTIFICATION OF WITNESS 3 4 ASSIGNMENT REFERENCE NO: 3182083 5 CASE NAME: In Re: National Prescription Opiate Litigation 6 DATE OF DEPOSITION: 1/10/2019 7 WITNESS' NAME: Clarence I. Tucker 8 In accordance with the Rules of Civil 9 Procedure, I have read the entire transcript of 10 my testimony or it has been read to me. 11 I have listed my changes on the attached 12 Errata Sheet, listing page and line numbers as 13 well as the reason(s) for the change(s). 14 I request that these changes be entered 15 as part of the record of my testimony. 16 17 I have executed the Errata Sheet, as well 18 as this Certificate, and request and authorize 19 that both be appended to the transcript of my 20 testimony and be incorporated therein. 21 22 Date _____ Clarence I. Tucker 23 24 Sworn to and subscribed before me, a 25 Notary Public in and for the State and County, the referenced witness did personally appear and acknowledge that: They have read the transcript; They have listed all of their corrections in the appended Errata Sheet; They signed the foregoing Sworn Statement; and Their execution of this Statement is of their free act and deed. I have affixed my name and official seal this _____ day of _____, 20____. _____ Notary Public _____ Commission Expiration Date</p>
<p style="text-align: right;">Page 311</p> <p>1 DEPOSITION REVIEW 2 CERTIFICATION OF WITNESS 3 4 ASSIGNMENT REFERENCE NO: 3182083 5 CASE NAME: In Re: National Prescription Opiate Litigation 6 DATE OF DEPOSITION: 1/10/2019 7 WITNESS' NAME: Clarence I. Tucker 8 In accordance with the Rules of Civil 9 Procedure, I have read the entire transcript of 10 my testimony or it has been read to me. 11 I have made no changes to the testimony 12 as transcribed by the court reporter. 13 14 Date _____ Clarence I. Tucker 15 Sworn to and subscribed before me, a 16 Notary Public in and for the State and County, 17 the referenced witness did personally appear 18 and acknowledge that: 19 They have read the transcript; 20 They signed the foregoing Sworn 21 Statement; and 22 Their execution of this Statement is of 23 their free act and deed. 24 25 I have affixed my name and official seal this _____ day of _____, 20____. _____ Notary Public _____ Commission Expiration Date</p>	<p style="text-align: right;">Page 313</p> <p>1 ERRATA SHEET 2 VERITEXT LEGAL SOLUTIONS MIDWEST 3 ASSIGNMENT NO: 1/10/2019 4 PAGE/LINE(S) / CHANGE /REASON 5 _____ 6 _____ 7 _____ 8 _____ 9 _____ 10 _____ 11 _____ 12 _____ 13 _____ 14 _____ 15 _____ 16 _____ 17 _____ 18 _____ 19 _____ 20 Date _____ Clarence I. Tucker 21 SUBSCRIBED AND SWORN TO BEFORE ME THIS _____ 22 DAY OF _____, 20____. 23 _____ 24 Notary Public 25 _____ Commission Expiration Date</p>

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Federal Rules of Civil Procedure

Rule 30

(e) Review By the Witness; Changes.

(1) Review; Statement of Changes. On request by the deponent or a party before the deposition is completed, the deponent must be allowed 30 days after being notified by the officer that the transcript or recording is available in which:

(A) to review the transcript or recording; and

(B) if there are changes in form or substance, to sign a statement listing the changes and the reasons for making them.

(2) Changes Indicated in the Officer's Certificate. The officer must note in the certificate prescribed by Rule 30(f)(1) whether a review was requested and, if so, must attach any changes the deponent makes during the 30-day period.

DISCLAIMER: THE FOREGOING FEDERAL PROCEDURE RULES ARE PROVIDED FOR INFORMATIONAL PURPOSES ONLY.

THE ABOVE RULES ARE CURRENT AS OF SEPTEMBER 1, 2016. PLEASE REFER TO THE APPLICABLE FEDERAL RULES OF CIVIL PROCEDURE FOR UP-TO-DATE INFORMATION.

VERITEXT LEGAL SOLUTIONS
COMPANY CERTIFICATE AND DISCLOSURE STATEMENT

Veritext Legal Solutions represents that the foregoing transcript is a true, correct and complete transcript of the colloquies, questions and answers as submitted by the court reporter. Veritext Legal Solutions further represents that the attached exhibits, if any, are true, correct and complete documents as submitted by the court reporter and/or attorneys in relation to this deposition and that the documents were processed in accordance with our litigation support and production standards.

Veritext Legal Solutions is committed to maintaining the confidentiality of client and witness information, in accordance with the regulations promulgated under the Health Insurance Portability and Accountability Act (HIPAA), as amended with respect to protected health information and the Gramm-Leach-Bliley Act, as amended, with respect to Personally Identifiable Information (PII). Physical transcripts and exhibits are managed under strict facility and personnel access controls. Electronic files of documents are stored in encrypted form and are transmitted in an encrypted fashion to authenticated parties who are permitted to access the material. Our data is hosted in a Tier 4 SSAE 16 certified facility.

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